

The Importance of Commitment in Intimate Relationships and How to Strengthen It

Thesis (cumulative thesis)

Presented to the Faculty of Arts and Social Sciences

of the University of Zurich

for the Degree of Doctor of Philosophy

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Accepted in the Spring Term 2015

on the Recommendation of the Doctoral Committee:

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Zurich, 2015

ACKNOWLEDGEMENTS

First and foremost, I am deeply grateful to my supervisor Professor Dr. Guy Bodenmann not only for giving me the opportunity to do research in the interesting field of intimate relationships, and writing this thesis, but also for being a role model and enormous promoter leading us in couple therapy.

My warmest thanks also go to Professor Dr. Veronika Brandstätter and Professor Dr. Markus Landolt for being the second and third investigators of this thesis. A special thank you goes to Professor Dr. Fridtjof Nussbeck both for his outstanding support in statistics, for his advice and encouragement.

I feel very privileged that I had the opportunity to stay at Professor Dr. Thomas Bradbury's lab at UCLA, and especially for being able to attend the interesting and inspiring lab meetings he held together with Professor Dr. Benjamin Karney and their team.

My heartfelt thanks go to my colleagues at our lab for supporting me and having good times together. My deepest gratitude goes to Martina; you shared much more than just the office with me. Without you, my scientific life would have been much grayer. I appreciated your academic and personal inputs a lot. Anne, even when you were up to your neck with work, you still had an open ear for my statistical questions and befriended me in many more ways. Tina, thank you for being helpful not only to me but for the whole team, even if you had so much else to do, and also thanks for discussing the context of our studies. Tina and Anne, I am so glad that you both accompanied me becoming CCET trainers and now being couple therapists. You both know how good and helpful intervention works.

A very big thank you goes to all the students for their help in conducting the research and providing the participating couples with an interesting study. I like to thank those couples for their interest and sharing, which enabled research in this fascinating field.

Finally, I would like to thank Stefanie and Martina for having a look at my English, and particularly my family and friends. Without your patience and support I would not have been able to endure the last four years. My genuine and most sincere thanks!

ABSTRACT

Finding one's love and having a long-lasting, fulfilling intimate relationship is an important goal for most people. According to the triangular theory of love (Sternberg, 1986), love can be distinguished in intimacy, passion, and decision / commitment. In this thesis, the central focus will be on commitment, as it is an important factor in the maintaining or dissolution of intimate relationships. The majorities of people get married eventually in their life and vow to love their partner for better or worse; however, about half of them get divorced. A vast corpus of research found that commitment, dyadic coping, and communication are the primary predictors of satisfaction and stability of intimate relationships. Therefore, the main goals of this thesis are to assess how commitment and coping contribute to relationship satisfaction, and how commitment can be strengthened when partners perceive stress in their relationship. In the empirical contributions ($N = 368$ couples), the results show (a) that dyadic coping compensated the impact of commitment on relationship satisfaction (Study I), and (b) that dyadic coping is a predictor of commitment, and that individual coping buffered the detrimental effect of stress on commitment for men (Study II). This leads to the conclusion that couples should enhance or maintain relationship skills, especially dyadic coping. Therefore, in the practical contributions, several preventions programs - particularly communication trainings - are presented. In the general discussion, the findings are summarized and discussed with respect to implications for future research and clinical practice.

ZUSAMMENFASSUNG

Im Zusammenhang eines gesunden und glücklichen Lebens, sind intime Beziehungen eine wichtige Ressource für den Alltag. Gemäss der Dreieckstheorie der Liebe (Sternberg, 1986) kann Liebe in Intimität, Leidenschaft und Entscheidung / Commitment unterteilt werden. Besonders Commitment wird in dieser Dissertation vertieft, da es ist ein wichtiger Bestandteil für langanhaltende intime Beziehungen ist. Denn immer noch die Mehrheit der Menschen heiraten irgendwann in ihrem Leben und versprechen, ihre Partner in guten und in schlechten Zeiten zu lieben. Trotzdem lässt sich über die Hälfte von ihnen scheiden. Darum ist es ein wichtiges Thema in der Paarforschung zu prüfen, was Beziehungen nachhaltig stärken kann. In jahrelanger Forschung erwiesen sich Commitment, dyadisches Coping und Kommunikation als die wichtigsten Prädiktoren für die Zufriedenheit und Stabilität der Beziehungen. Deswegen ist das Hauptziel dieser Dissertation der Forschungslücke nachzugehen, wie Commitment und Coping gemeinsam zur Partnerschaftszufriedenheit beitragen und wie Commitment gestärkt werden kann, wenn es Stress in der Beziehung gibt. In den empirischen Beiträgen ($N = 368$ Paare) zeigen die Ergebnisse, (a) dass dyadisches Coping den Zusammenhang zwischen Commitment und Beziehungszufriedenheit moderiert (Studie I) und, (b) dass dyadisches Coping ein Prädiktor für Commitment ist und individuelles Coping die schädliche Wirkung von Stress auf das Commitment für Männer puffert (Studie II). Die Resultate unterstreichen die Wichtigkeit von Beziehungskompetenzen - insbesondere dem dyadischen Coping - für eine erfüllte und stabile Partnerschaft. In diesem Zusammenhang werden in den praktischen Beiträgen mehrere Präventionsprogramme vorgestellt und spezifisch auf Kommunikationstrainings eingegangen. In der Diskussion werden die Ergebnisse zusammengefasst und im Hinblick auf Auswirkungen auf die künftige Forschung und klinischer Praxis diskutiert.

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INTRODUCTION

The scientific study of intimate relationships has gained enormous interest in the past several decades. The present thesis addresses the importance of commitment in intimate relationships and how they can be strengthened. Chapter 1 defines intimate relationships, goes on to describe the theory of love, and finishes with the importance of marriage, and the by contrast high rates of divorces. Hence, chapter 2 focuses on commitment and provides an overview over different theories of commitment, such as the investment model, the tripartite model, and a new parsimonious concept of commitment. Chapter 3 takes account of the impact of stress on intimate relationships and the possibilities on how couples deal with it in form of individual and dyadic coping. The research questions, empirical and practical contributions are addressed in chapter 4 - 8. Chapter 9 - 12 discusses the summary of findings, with its limitations and practical implications.

1. Intimate relationships

We are considering intimate relationships as an interesting interface of social psychology, communication studies, family studies, sociology, clinical psychology, and neuroscience (R. S. Miller, 2011). When the two American social psychologist Harold Kelley and John Thibaut planned their book "The Social Psychology of Groups" (1959), they wanted to write about the behaviors of small groups of people and intended to start with the smallest group possible: the dyad. Their goal was to move further to bigger groups, once they had understood the relationships between two people. At the end, they studied the two-person group for the rest of their lives and developed the interdependence theory (Bradbury & Karney, 2010). In (a) *interdependent* relationships, the behaviors of two people affect each other mutually. Interdependence is the defining characteristic of any social relationship between two persons, such as guard-prisoner, shopkeeper-regular customer, or nurse-patient.

A (b) *personal* relationship is an interdependent relationship in which the partners consider each other special, treat one another as unique individuals, and experience a deeper emotional understanding (Blumstein & Kollock, 1988). A (c) *close* relationship is a personal relationship in which the partners have a strong and frequent influence on each other that lasts over a considerable period of time in a variety of situations (Kelley et al., 1983). Their thoughts, feelings, and behaviors routinely affect one another in meaningful ways, and these influences are manifested in many of the things they do each day. (d) *Intimate* relationships are defined as close relationships that include some kind of experience of mutual erotic and sexual passion that could be expressed and shared. As long as the dyad has the possibility that each could experience sexual passion for the other in the context of a close relationship, it is defined as an intimate relationship independent of the happiness of the two partners. Intimate relationships and their consequences are important to understand because they are basic features of who we are as human beings. Our thoughts and feelings about our relationships, and how we communicate with our partner may well contribute to how long we live for example after a serious health-related event (Bradbury & Karney, 2010).

Relationship quality is a core determinant of global life satisfaction as well as of mental and physical health (Christensen & Heavey, 1999; Gottman, 1998). Holt-Lunstad, Smith, and Layton (2010) found in their meta-analysis that the quality and quantity of individuals' social relationships was not only linked to mental health but was also associated with a lower risk of mortality. The effect sizes were equal or even larger than for the most prominent risk factors, such as smoking, lack of exercise, or obesity. This was in line with the meta-analysis by Proulx, Helms, and Buehler (2007), which found that higher levels of marital quality were associated with higher levels of personal well-being.

1.1. Theory of love

And maybe love is letting people be just what they want to be

The door always must be left unlocked

To love when circumstance may lead someone away from you

And not to spend the time just doubting

Howard Jones (1983) - What Is Love

In his triangular theory of love, Robert Sternberg (1986) divides love into three different components: intimacy, passion, and decision / commitment. (1) Intimacy encompasses the "warm" feelings of closeness, connectedness, and bonding experienced in loving relationships and is an emotional investment. At the beginning of a relationship there is a lot of uncertainty in the relationship, as it is not possible yet to predict the others' actions, emotions, motivations, and cognitions. As time goes on, partners experience each other as more predictable in these areas; they become more dependent on each other, and intimacy increases. Often individuals do not have any idea about the degree of intimacy they share; for example after a separation, they are surprised about the degree of intimacy they had and about the degree of postdecisional regret. (2) Passion encompasses the "hot" drives that lead to romance, physical attraction, and sexual consummation and is a motivational involvement. The course of the passionate arousal often begins suddenly, and peaks fairly rapidly; the individual reaches a more or less stable and habituated level of arousal toward the partner. The passionate arousal gradually moves close to the baseline (c.f. the opponent-process theory of acquired motivation by Solomon, 1980). (3) Decision / commitment is a "cold" cognitive decision that the partners love each other in the short term. In the long-term, commitment to the relationship means maintaining this love over time. The commitment level normally starts at a zero baseline and increases as the partners come to know each other better. If it is to become a long-term relationship, the increase is gradual at first and then usually speeds up to a certain stage where it levels off. It depends largely on the success of the relationship whether commitment remains stable or whether a period of descent begins, maybe even

declining to baseline. As every relationship has its ups and downs, the commitment curve varies substantially across different couples.

According to Sternberg (1986, p. 119), "the amount of love one experiences depends on the absolute strength of these three components, and the kind of love one experiences depends on their strength relative to each other." Often in the first place it is the passion component that draws the individual to the relationship; the intimacy component then helps to maintain closeness in the relationship. However, as relationships inevitably have bad times, the decision / commitment component may in such times be the element that keeps the relationship going. Sternberg states that it is often difficult to control the intimacy or passion component, whereas one has considerable control over decision / commitment, and this control may prevent relationship distress or separation (Sternberg, 1986).

1.2. Marriage

While in the middle of the 20th century almost everyone married at least once during their lives (see Figure 1), in Switzerland nowadays only about 60% marry (Federal Statistical Office, 2014e). About two-thirds of all marriages in the last 15 years were first marriages for both partners; in the remainder, one partner or both partners had been married before (compared to 85% of first marriages in 1970, 78% in 1980, and 75% in 1990). These figures indicate that marriages in some way are declining in importance in Switzerland, and if someone decides to marry, it is often to marry again. In contrast to the decreasing rate of marriage, most adults still pursue the goal of finding an intimate relationship and of marrying at some point in their lives (Trail & Karney, 2012).

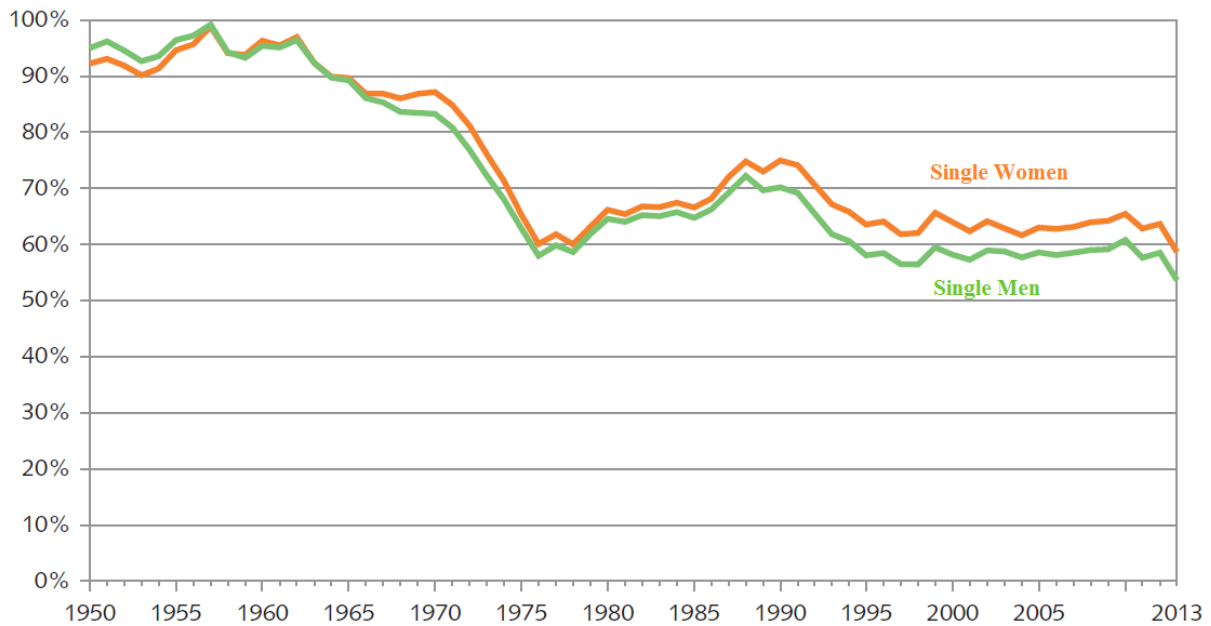


Figure 1. Total first marriage rate of all single persons in Switzerland from 1950 to 2013 (Federal Statistical Office, 2014e).

In a study of 300 adolescents between 17-23 years old, Bodenmann (2003) focused on their mental representations, attitudes, and expectations towards close relationships, marriage, and love. The adolescents answered that intimate relationships were the most important area in their lives, followed by health and education. Concerning expectations of relationships, they stated that faithfulness was still a main issue for them in close relationships, next to caring, emotional security, and sexual fulfillment. Most of the adolescents still described marriage as a lifelong relationship. However, adolescents with divorced parents rated their own divorce risk higher than adolescents from intact families. Intriguingly, more than 80% of the adolescents were not aware of the importance of investment in the relationship, and most of them rated prevention programs and counseling for couples as unnecessary.

Early cross-sectional research suggested a U-shaped course of marital satisfaction; couples start with high relationship satisfaction, which declines after the honeymoon period, remains stable during the child-rearing years, and after the children have left returns to the level of the honeymoon phase (S. A. Anderson, Russell, & Schumm, 1983; Rollins & Cannon, 1974; Rollins & Feldman, 1970). However, some more recent longitudinal studies

have found that marital satisfaction tends to decline monotonically over time (Glenn, 1998; Karney, 2015; Karney & Bradbury, 1997; Kurdek, 1999; Vaillant & Vaillant, 1993). In contrast, a five-year longitudinal study by Sprecher (1999) found that participants perceived that their love, commitment, and satisfaction had even grown over time. However, little evidence was provided that these effects were actually increasing, because the answers given in the questionnaires between the waves indicated no increase. This could be due to ceiling effects or idealization of the relationship. Other analyses based on group-based trajectory modeling have shown that nearly two thirds of the marriages actually remain high and stable in happiness across time (J. R. Anderson, Van Ryzin, & Doherty, 2010). The average declines were driven entirely by the one third of the sample with declining satisfaction (see Figure 2). Those participants with the highest initial relationship satisfaction were those who reported stable trajectories, whereas spouses with the lowest initial satisfaction reported the greatest declines. The divorce risk was highest in those couples with low and declining trajectories (Lavner & Bradbury, 2012).

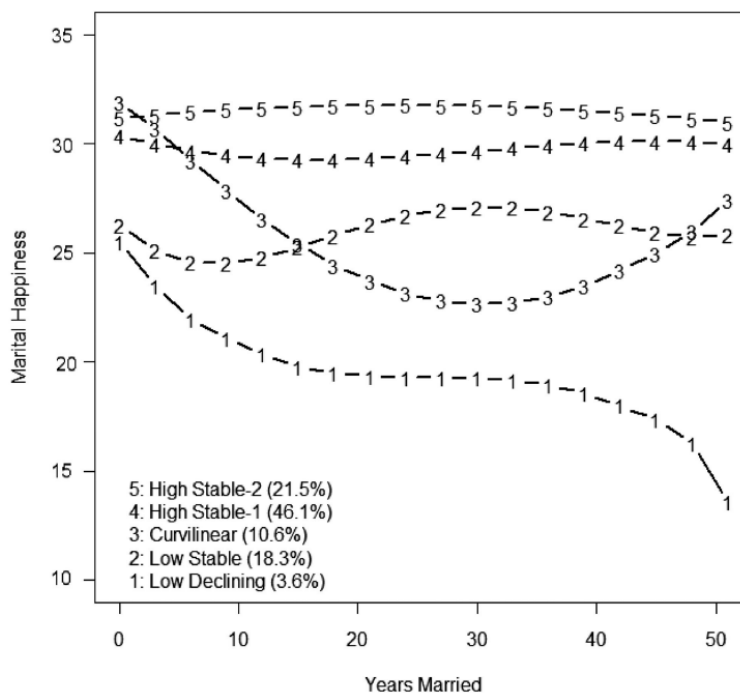


Figure 2. Trajectories of marital happiness (J. R. Anderson et al., 2010, p. 591).

1.3. Divorce

"The increase in marital instability has not brought society to the brink of chaos, but neither has it led to a golden age of freedom and self-actualization" (Amato, 2000, p. 1282).

Divorce rate

In Switzerland, the divorce rate is over 50% (see Figure 3) and has been steadily increasing for the last 40 years (Federal Statistical Office, 2014d)¹. In 2010, the average duration of marriage at time of divorce was about 14.5 years (Federal Statistical Office, 2014b), with a mode (peak) between 5 to 9 years, while 30% of the marriages ended after a duration of more than 20 years.

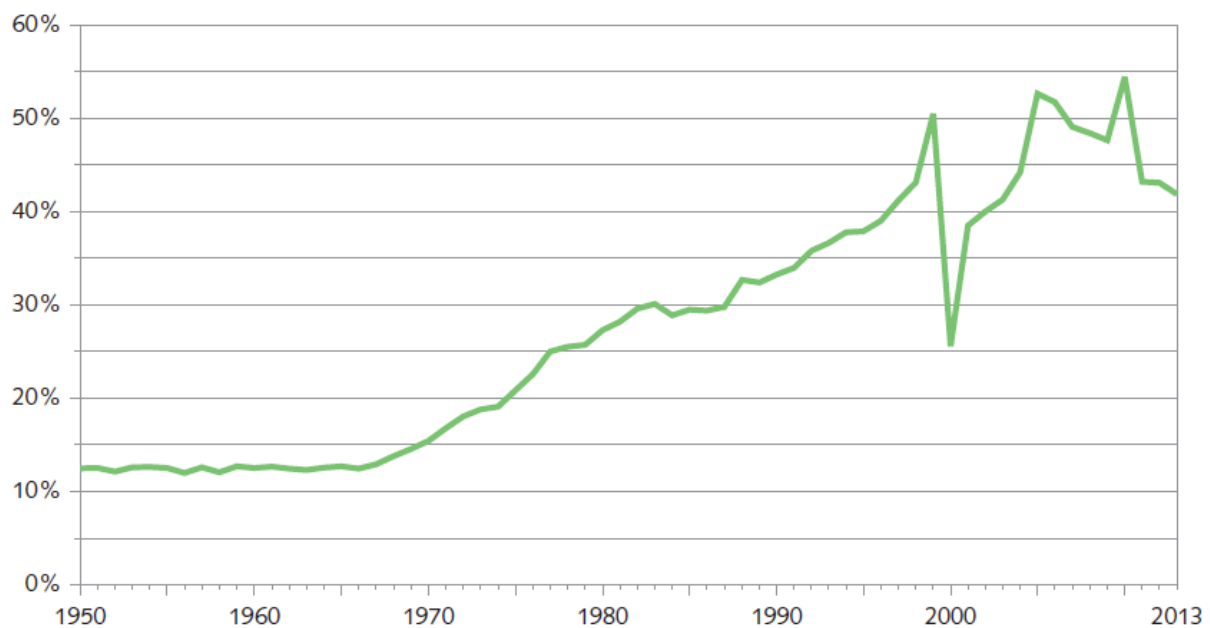


Figure 3. Total divorce rate in Switzerland from 1950 to 2013 (Federal Statistical Office, 2014d).

According to Amato and James (2010), the United States (US) have the highest divorce rate of many western nation, although divorce rates have been increasing in almost all

¹ From 2011, the divorce statistics have no longer been based on court judgments but on the computerized civil status register (Infostar). Information on divorces involving two spouses of foreign nationality is no longer available in the divorce statistics. This results in a break in the divorce statistics, so data from 2010 are described.

European countries, too. The rate is comparable with Switzerland, where half of the marriages end by divorce (Cherlin, 2010; Karney, 2015). The majority of those who dissolve their marriages marry again (Sweeney, 2010), and failure rates of these subsequent marriages are even 10% higher than for first marriages (Bumpass & Raley, 2007; Martin & Bumpass, 1989).

Reasons for divorce

Amato and Hohmann-Marriott (2007) conducted a longitudinal study of 509 couples who divorced between two waves. They found that half of the divorced couples were high-distress relationships, whereas half of the divorced couples were low-distress relationships. To most outside observers, low-distress couples seem relatively untroubled and, before divorce, they did not differ significantly concerning interaction, conflict, violence, or chance of divorce from other married couples. The level of marital happiness before the divorce was equal for the low-distress divorced wives and the still-married wives; counterintuitively, low-distress husbands showed even higher levels of marital happiness before the divorce than those who remained married, but this effect was modest. In this analysis, marital quality indicators did not predict divorce for low-distress couples accurately, as they predicted that no couples in this group would divorce.

The low- and high-distress couples that divorced shared many risk characteristics, such as having divorced parents, cohabiting with other partners prior to the current marriage, marrying at early age, having stepchildren in the household, holding liberal family values, and believing in the acceptability of divorce. Additionally, high-distress couples showed less marital happiness, less interaction, more conflict, and more violence than the low-distress couples and the still-married couples. The authors suggest that there are two basic motivations for divorce: on the one hand poor relationship quality (high-distress couples) and on the other hand a range of various risk factors which could lead to more conflicts in relationships and, as a result, to a weaker relationship commitment (low-distress couples). Commitment is

associated with relationship adjustment and predicts relationship stability (Rhoades, Stanley, & Markman, 2010). Both groups seem to have attractive alternatives, as both groups showed high levels of infidelity and early dating after separation. In about 75% of the low-distress couples, at least one of the partners was already involved with another partner at the time the marriage ended. Nock (1998) claims that infidelity was one of the pivotal reason that may lead to the quick demise of many marriages. However, after the divorce high-distress couples reported an increase in happiness, while low-distress couples reported a decrease of happiness (Amato & Hohmann-Marriott, 2007), which is in line with Sternberg (1986) that many partners are surprised postdecisional about the missing intimacy.

Stress-divorce model

Bodenmann (1995, 2000b) proposed the stress-divorce model (see Figure 4) with a focus on the impact of minor daily stress on couples' relationship functioning, such as (a) spending less time together, (b) decreasing quality of communication with more negative interaction and withdrawal, (c) increasing risk of physical and psychological problems, such as sexual dysfunction, sleep disorders, and mood disturbances, and (d) revealing more problematic personality traits, such as rigidity, anxiety, and hostility. Minor extradyadic stress has a spill-over effect on the relationship (Bodenmann, Ledermann, et al., 2007) through these four mediators and usually leads to mutual alienation and dissatisfaction. In the long run, this results in a slowly decreasing relationship quality, and, as a consequence, the partners begin to evaluate the advantages and disadvantages of divorce, so the risk of divorce increases (Bodenmann, 2000b; Bodenmann, Meuwly, Bradbury, Gmelch, & Ledermann, 2010).

What is special about this model is its explicit attention to chronic minor extradyadic stress, referred to as daily hassles, and their impact as it is assumed that the accumulation of daily hassles leads to an overload on individual and dyadic resources (Bodenmann, 2012). The functional coping and problem solving both of each partner and of the dyad are

moderator variables buffering the impact of stress on couples' functioning (Randall & Bodenmann, 2009).

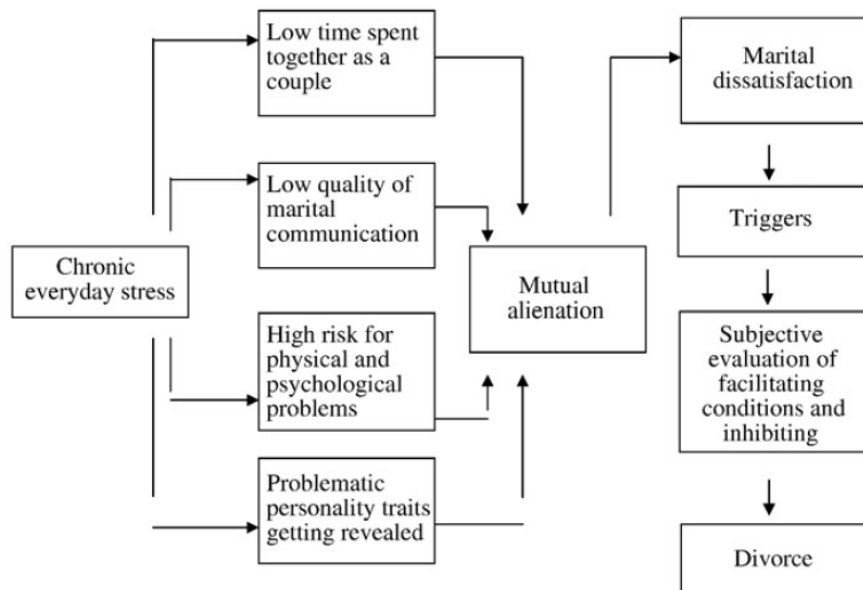


Figure 4. Bodenmann's stress-divorce model (Randall & Bodenmann, 2009, p. 108).

Stress research shows that chronic minor extradyadic stress can spill over in the relationship, causing less time for each other and more negative interaction between partners (see Randall & Bodenmann, 2009). It may be easier for couples to attribute intradyadic stress to major life events, than to daily hassles, which are more subtle, frequent, and ordinary (Bodenmann, Ledermann, & Bradbury, 2007). Partners are often unaware of these daily hassles, or they are considered to be trivial and therefore attract less empathy and understanding from the partner. The impact of these stressors is likely to be underestimated, as they seem to be objectively rated as having low intensity but can still cause a great deal of stress that can spill over into the relationship (Lazarus & Folkman, 1984).

Impact of divorce

Numerous negative effects follow separation and divorce, such as increased risk for all-cause mortality (Sbarra, Law, & Portley, 2011), psychopathology, automobile accidents, physical illness, suicide, violence, homicide, significant immunosuppression, and mortality from diseases (for an overview see Gottman, 1998). Economic costs also rise (Holden &

Smock, 1991; McManus & DiPrete, 2001; Schramm et al., 2013). The high divorce rate is also a critical issue in our ageing society, as it removes the traditional primary source of help and support in the later years (Glaser, Tomassini, Racioppi, & Stuchbury, 2006).

Additionally, adults and children from divorced families are affected through several mechanisms, including disruptions in parent-child relationships, experienced loss of emotional support, increased economic hardship, more negative life events, such as moving, and continued discord between former spouses. Children of divorced parents consistently scored lower on a variety of indicators of well-being, were less educated, earned less, had more troubled relationships, had weaker ties with parents, and reported more psychological distress (Amato, 2000).

Amato and Cheadle (2005) used longitudinal data to assess the long reach of divorce rippling from grandparents to grandchildren. They suggest that divorce has consequences not only for the children, but even for the grandchildren, despite the fact they were born after the original divorce. Children from divorced grandparents were lower educated, had more relationship problems, and had weaker ties with their parents. The middle generation seemed to have similar problems (lower education, increased marital instability and discord, increased tension with their parents). This supports the mediation model that the grandparents' divorces lead to problems for the grandchildren by affecting characteristics of the middle generation.

2. Commitment

*You can't say "Yes" and you don't wanna say "no",
there're a thousand possibilities and you don't know where to go.
It's hip not to choose, but someone's gotta lose,
and you don't see - it only fills me with antipathy.*
Eva (2012) - Uncommitted

Several researchers have explored commitment², when seeking a fundamental understanding of romantic relationships development, over the last 50 years (Johnson, 1973; Rusbult, 1980; Stanley & Markman, 1992). However, commitment is difficult to operationalize, and there is no consensus on its definition nor on the dimensionalities inherent in relationship commitment (Pope & Cashwell, 2012). Lay concepts of commitment refer to perseverance, responsibility, and devotion (Fehr, 1988). Caryl Rusbult (1983, p. 102) defined commitment as “the tendency to maintain a relationship and to feel psychologically ‘attached’ to it.” John Lydon (1996, p. 192) conceptualized commitment as “an internal psychological state in which a person feels tied to or connected to someone or something.” In his opinion, individuals are most committed to goals which affirm who they are and give meaning to their lives. Commitment can be a way of fulfillment and serve as a bridge to the social world. Galinsky and Sonenstein (2013, p. 94) define relationship commitment as "subject construct (a long-term orientation, feelings of psychological attachment) and as objective characteristics (formal relationship status, defined by law, behavior or partner-applied label)." And Rhoades, Stanley, and Markman (2010, p. 550) claim that "commitment can be conceptualized in many ways, but the most fundamental meaning in a romantic relationship is that there is a future."

² In this work, we focus on commitment in intimate relationships while keeping in mind the fact that there are different forms of commitments, such as organizational commitment (Allen & Meyer, 1990; Meyer & Allen, 1997; Rusbult & Farrell, 1983), political commitment (de Almeida, Minas, & Cayetano, 2014), religious commitment (Tix, Dik, Johnson, & Steger, 2013), and brand commitment (Beatty, Homer, & Kahle, 1988; Fournier, 1998; Traylor, 1981)

Commitment can further be considered as an individual cognitive activity (Sternberg, 1986), a decision partners make concerning their partner and relationship. Givertz, Segrin, and Hanzal (2009) see commitment as more individualistic, affected by one's own behavior, thoughts, and feelings related to a relationship rather than one's partner's thoughts and feelings. They found that spouse's commitment was unrelated to their partner's level of marital satisfaction for most couples, while within traditional couples even spouse's satisfaction was unrelated to the individual's own commitment. So commitment appeared to be driven by internal satisfaction or ideologies, but not partner satisfaction, and commitment to marriage for traditional couples appears to be yoked to a traditional value system and driven by ideology rather than rewards. The determinants of commitment and its processes seem not to be uniform across different types of couples. Other researchers found that commitment also has some relationship characteristics (Sprecher & Hendrick, 2004), not just individualistic, and husband's and wives' commitment accounted for a unique proportion of variance in relationship stability (Impett, Beals, & Peplau, 2001). According to the theory of reasoned action (Fishbein & Ajzen, 1975) commitment can be seen as a learned attitude. From this perspective, attitudes are viewed as a multi-component system comprising beliefs about someone or something (cognitions), feelings toward someone or something (emotions), and behavior or action tendencies toward someone or something (behavior) (Rosenberg & Howvland, 1960).

2.1. Investment model

The interdependence theory, part of the social exchange theory (how people exchange rewards and costs), describes how people try to maximize rewards while minimizing costs (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959). Interdependence is considered to be the extent to which the behavior of one partner affects the outcomes of the other and vice versa. The rewards of a relationship represent behaviors or situations that fulfill the needs and desires of each partner (such as affection, belonging, security, companionship, intimacy,

sexuality), while the costs of a relationship are any consequences that prevent partners from fulfilling their needs or desires (e.g., worries for the partner, disturbing habits, arguments). If the needs and desires are fulfilled, partners feel satisfied and are pleased with the relationship. Interdependence theory distinguishes between satisfaction with a relationship and dependence on a relationship. The investment model (Rusbult, 1980, 1983) adopts this distinction, arguing that dependence is a structural state, while commitment is a subjective experience that dependent individuals experience on a daily basis and also influences everyday behavior in relationships (Agnew, Van Lange, Rusbult, & Langston, 1998). The more individuals become dependent on their relationships, the more their commitment increases (Rusbult, 1983; Rusbult, Drigotas, & Verette, 1994).

Conative, cognitive, and affective commitment

As a social psychologist, Caryl Rusbult adhered to a social-psychological tradition of examining feelings, thoughts, and motivations (e.g., Ostrom, 1969) when she defined commitment. Commitment level is therefore considered as a multidimensional construct with three interrelated components: intention to persist (*conative*), long-term orientation (*cognitive*), and psychological attachment (*affective*) (Arriaga & Agnew, 2001; Rusbult, Olsen, Davis, & Hannon, 2004).

Conative commitment: According to Finkel, Rusbult, Kumashiro, and Hannon (2002), the intention to persist is the most primitive component as it does not involve any broadened temporal or interpersonal interests. The simple decision to remain dependent on a partner occurs when the relationship has desirable outcomes, or a great deal was invested, and / or the alternatives are poor. When individuals are committed, they need their relationship and thus are more willing to forgive a partner and to hold on to what they have, because they have more to lose. With increasing dependence, individuals become intrinsically motivated to persist with their partners (Rusbult et al., 2004).

Cognitive commitment: Long-term orientation has a broadened temporal interest. In contrast to short-term orientation, where individuals may reach pretty good outcomes by following self-interest, in long-term orientation, partners have to develop patterns of reciprocal cooperation (Finkel et al., 2002). If partner A forgives partner B's transgression, B will probably forgive A's transgression at a later date. In the light of a partner's reciprocal beneficence, the costs of forgiveness are aggregated over a longer time perspective. Arriaga and Agnew (2001) found that long-term orientation plays a prominent role in romantic relationships. It accounted for unique variance in predicting persistence and remained significant even after controlling for couple functioning. Leavers showed particularly low levels of long-term orientation relative to the other two components, whereas long-term orientation even increased for stayers. In their meta-analysis, Le and Agnew (2003) concluded that only individuals who take the step to end a relationship show lower commitment levels prior to break-up, whereas abandoned individuals show levels similar to those of stayers. Therefore, it is difficult to predict relationship stability without taking into account both partners' commitment, as the person with the lower commitment level, also called the "weak-link" partner, predicts the result better than the other partner (Schoebi, Karney, & Bradbury, 2012). With increasing dependence, individuals envision themselves as being involved in their relationship for the foreseeable future, considering the implications of present actions for future outcomes (Rusbult et al., 2004).

Affective commitment: The third component involves broadened interpersonal interests, or psychological attachment. Committed individuals perceive their own well-being and the partner's well-being as linked. The partners may become merged to the extent that benefitting the partner's interests is not experienced as antithetical to self-interest (Agnew et al., 1998). This communal orientation includes tendencies to respond to a partner's need in a rather unconditional manner, without counting what they receive in return and whether their beneficence will be reciprocated (Finkel et al., 2002). With increasing dependence,

individuals come to experience life in dyadic terms, such that their emotional well-being is influenced by their partners and relationships (Rusbult et al., 2004).

Satisfaction level, quality of alternatives, and investment sizes

According to the interdependence theory (Kelley & Thibaut, 1978), dependence is a fundamental property of relationships and describes the degree to which an individual needs his or her relationship or the extent to which an individual's personal well-being is determined by involvement in the relationship (Agnew et al., 1998; Rusbult et al., 2004). Individuals become increasingly dependent on their relationships and gradually develop more commitment (Rusbult, 1980, 1983; Rusbult et al., 1998) as a consequence of (1) high relationship *satisfaction* (i.e., a relationship gratifies important needs, such as the needs for intimacy or security, and the positive affect is higher than the negative affect experienced in the relationship), (2) low quality of *alternatives* (i.e., important needs could not effectively be gratified by alternative dating partners, friends, or family), and (3) high *investment* (i.e., resources, such as personal identity, effort, and material possessions become linked to a relationship, and these would be lost or decline in value if the relationship were to end).

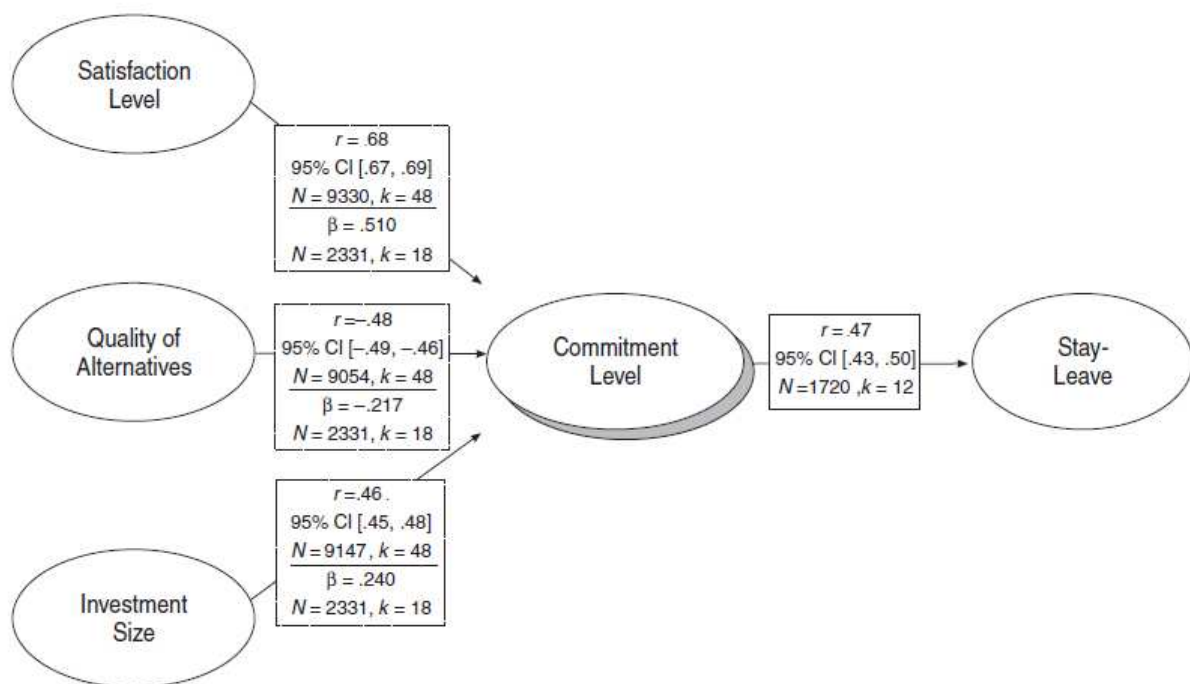


Figure 5. The investment model: Predicting commitment and stay-leave behavior across studies (Le & Agnew, 2003, p. 38).

In the meta-analysis of the investment model, Le and Agnew (2003) conducted 52 studies with 11,582 participants. Satisfaction with ($r = .68$), alternatives to ($r = -.48$), and investments in ($r = .46$) a relationship correlated each significantly with commitment and accounted for 61% of the variance in commitment (see Figure 5). The correlation between commitment and stay-leave behavior was $r = .47$. Interestingly, the authors did not find any gender differences in the associations with commitment or the prediction of commitment, but analyses indicated that women were more satisfied, reported perceiving fewer alternatives, felt more invested, and were more committed than were men to their romantic relationship, but only with small effect sizes Cohen (1992).

According to Vanderdrift, Lehmiller, and Kelly (2012) it is commitment itself rather than the three bases (satisfaction level, alternatives, and investment) which provide explanatory power toward understanding an individual's level of commitment. Each of the three components of commitment develop somewhat independently of the others as a function of different antecedents (N. J. Allen & Meyer, 1990). Le and Agnew (2003) further claim that not all of these factors must be present for individuals to experience commitment. For example, women with high investment may stay in abusive relationships in spite of a lack of satisfaction or, on the contrary, if someone is very satisfied he / she may still experience a lack of commitment if very attractive alternatives are present.

Relationship maintenance mechanisms

According to Levinger (1976, p. 23), intimate relationships can be distinguished by the degrees of interpersonal involvement, "the continuum of interpersonal involvement ranging from superficial contact to profound closeness - as indicated by varying degrees of cognitive, behavioral, and emotional interdependence." Behavior is often shaped by broader concerns, including long-term goals, strategic considerations, and the desire to promote the well-being of one's partner and oneself. The long-term perspective of commitment especially leads to mechanisms for sustaining an intimate relationship (Frank & Brandstätter, 2002; Sternberg,

1986; Wieselquist, Rusbult, Foster, & Agnew, 1999). Partners develop a wide range of patterns of reciprocal pro-relationship behaviors and consciously pursue the objective of a long-term relationship (Finkel et al., 2002). Strong commitment encourages a variety of relationship maintenance mechanisms, such as behavior and cognitive restructuring toward the goal of enhancing couple well-being (see Figure 6).

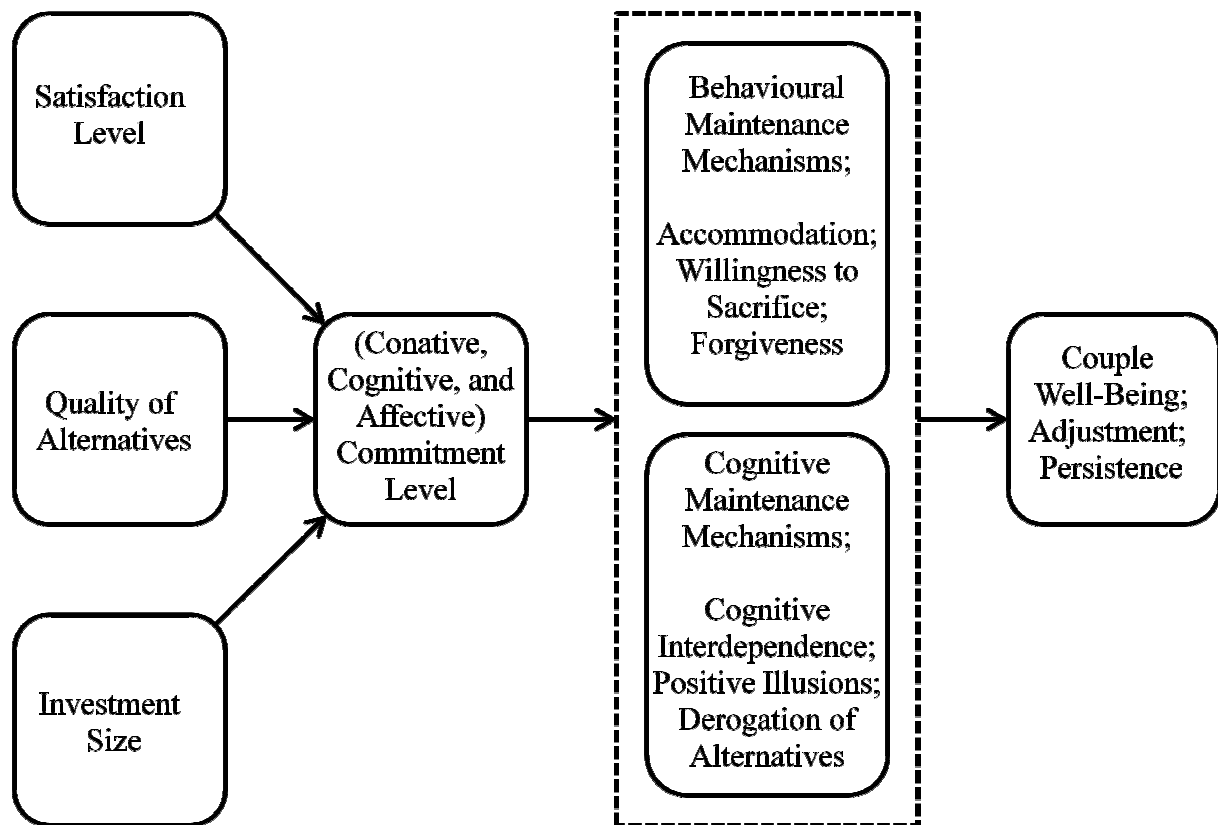


Figure 6. Commitment and relationship maintenance mechanisms (Rusbult et al., 2004, p. 294).

As a psychological construct, commitment influences everyday behavior maintenance mechanisms (see Figure 6) in relationships; these include accommodation, willingness to sacrifice, and forgiveness (Rusbult et al., 1998). *Accommodation* means holding back the impulse to react in a hostile way when a partner enacts a potentially destructive behavior and as an alternative reacting in a beneficial manner (Rusbult, Verette, Whitney, Slovik, & Lipkus, 1991). *Willingness to sacrifice* is defined as the inclination to forego instant self-interest to promote the well-being of the partner and relationship (Van Lange et al., 1997). *Forgiveness* is defined as the victim's willingness to forego the want for vengeance and

demands for atonement when the partner has violated an implicit or explicit relationship-relevant norm. Instead, the victims react in a less judgmental and more constructive way (Finkel et al., 2002).

Committed individuals tend to engage automatically in cognitive maintenance mechanisms (see Figure 6), such as cognitive interdependence, positive illusion, and derogation of alternatives (Rusbult, Drigotas, & Verette, 1994). *Cognitive interdependence* is defined as a mental state characterized by a pluralistic, collective representation of the self and the partner or of the self-in-relationship instead of an individual-based internal representation (Agnew et al., 1998). This high level of we-ness is expressed in a higher rate of plural pronoun usage (rather *we, us, our* than *I, me, mine*), by a high degree of overlap in mental representation of self and partner, and by viewing the relationship as a central and important component. *Positive illusion* is defined as idealized beliefs regarding the partner and relationship through cognitive filters (negative information is screened out), downward social comparison (comparing the relationship to others that are less well-off), and dimensional comparison (comparing the dimensions of the relationship on which it excels over other relationships) (Van Lange & Rusbult, 1995). *Derogation of alternatives* involves the tendency to perceive the quality of alternatives as lower. On the one hand, there are probably fewer tempting alternatives as they "take themselves out of the running" if they see that an individual is committed. On the other hand, individuals also cognitively disparage alternative partners by actively minimizing their abilities or attributes (D. J. Johnson & Rusbult, 1989). Another dimension involves being less attentive and spending less time attending to attractive alternatives, so "even if the grass is greener elsewhere, happy gardeners may not notice" (R. S. Miller, 1997, p. 765). Narcissistic people, for example, were found to be less committed, and this was primarily a result of perception of alternatives and attention to alternative dating partners (Campbell & Foster, 2002), because they think that many options

outside their relationships are appealing (Foster, Shrira, & Campbell, 2006). As a result, they had higher levels of infidelity (Campbell, Foster, & Finkel, 2002).

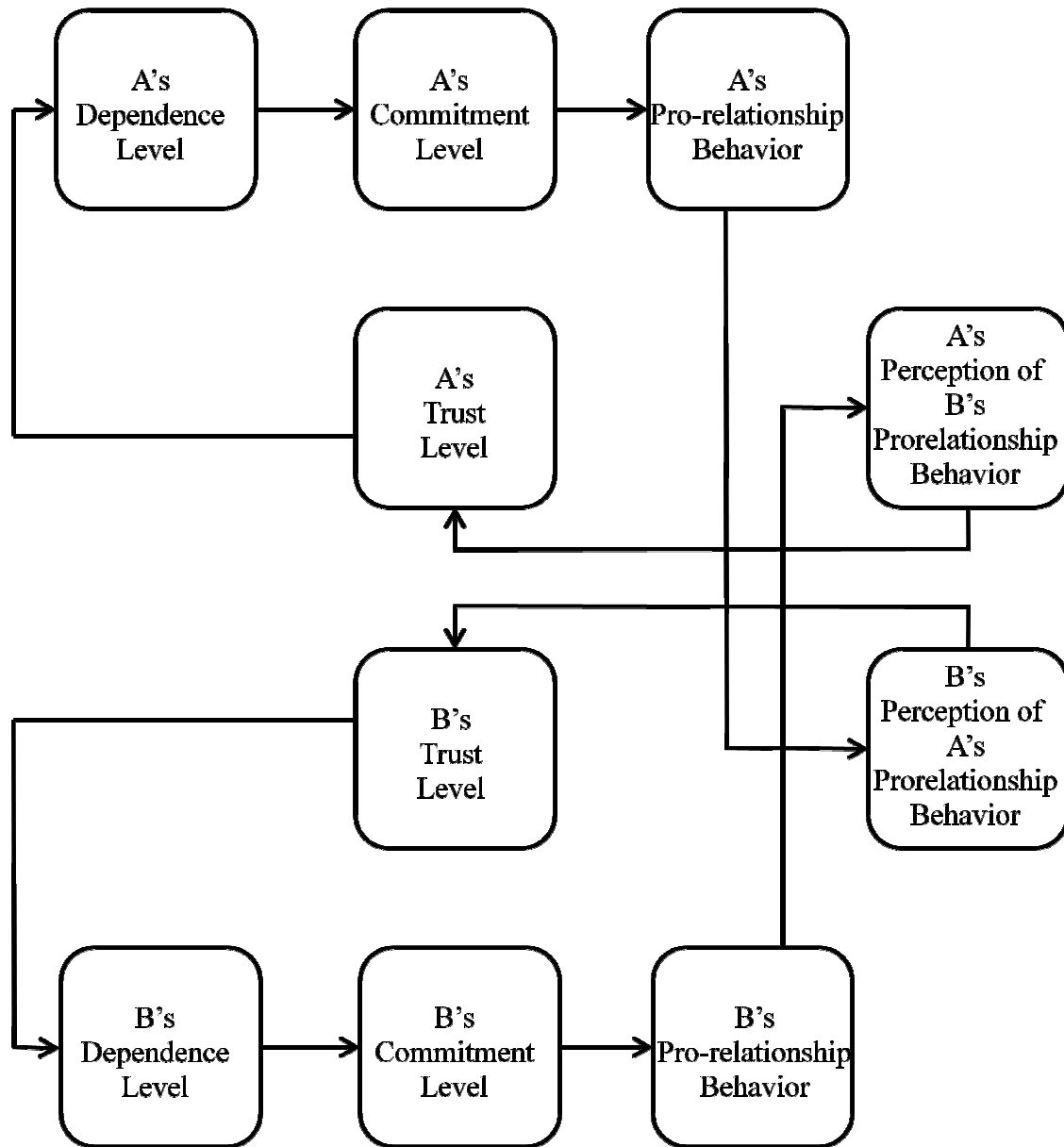


Figure 7. A mutual cyclical growth model of the associations among commitment, pro-relationship behavior, and trust (Wieselquist et al., 1999, p. 945).

In the model of mutual cyclical growth (see Figure 7), dependence promotes strong commitment, which promotes pro-relationship acts, which are perceived by the partner. This enhances the trust of the partner, who then experiences greater willingness to become dependent on the relationship, which leads to more commitment, which promotes pro-relationship behavior, which is then perceived by the partner, and so on (Wieselquist et al., 1999). "Over the course of extended involvement, each person's movement toward increased

dependence, commitment, pro-relationship behavior, and trust will be accompanied by parallel movement on the part of the partner" (p. 950). According to Drigotas, Whitney, and Rusbult (1995), relationship growth requires more than a fifty-fifty reciprocity. Occasionally, partners should be willing to give more than their partners seem to provide and have faith that the partner later on enacts as many pro-relationship behaviors as themselves. This is especially important, as acts of loyalty are often not noticed or misinterpreted by the partner, or produce less intense outcomes. Likewise, Murray et al. (2011) have shown that if participants perceive their partners to be more responsive and supportive, they feel more committed than if they perceive them to be unresponsive or rejecting. Landis et al. (2014) also describe how these relational maintenance efforts for mutual adjustment can result in a reinforcing loop in which commitment can function as a predictor and criterion because of these interactions and interdependencies.

Karney and Bradbury (1995) criticized the fact that, while the interdependence model is useful for explaining why some satisfied couples break up whereas other unsatisfied couples stay together, the model says little about the trajectories of relationships: why once-happy couples turn into unsatisfied couples, while others stay satisfied. Most current theoretical models concur that relationships not only persist because of high relationship satisfaction and positive qualities, but also because of the constraints and barriers that bind partners together and keep them from leaving their relationships (Bodenmann, Charvoz, et al., 2006; Johnson, 1991; Rusbult, 1980, 1983; Schoebi, Karney, & Bradbury, 2012; Stanley & Markman, 1992). Impett, Beals, and Peplau (2001) suggested including behavioral theory to emphasize patterns of interaction in couples, attachment theory for its emphasis on the individual differences in cognitions about relationships, and crisis theory for the impact of stressful life events.

2.2. Tripartite model

The experience of marital commitment, as described by Michael P. Johnson (1973, 1991), is not unitary but multidimensional. It involves three distinct experiences: wanting to stay married (*personal commitment*), feeling morally obliged to stay married (*moral commitment*), and feeling constrained to stay married (*structural commitment*). Each of these types of commitment has a different set of causes, a different phenomenology, and different cognitive, emotional, and behavioral consequences.

Personal commitment refers to wanting to stay in the relationship and is affected by three components. The first is the wish to stay in a relationship because of attraction to the partner; the second component is attraction to the relationship. Although there may be a high correlation between these two components, they are distinct, since a person can be attracted to a person but might not want to stay in the relationship. Couple identity is the third component of personal commitment; being in a relationship can become a relevant aspect of the self-concept.

Moral commitment is a sense of moral obligation to continuing a relationship and also contains three components. The first component represents the values that marriage ought to last “until death do us part”. Secondly, there can be a moral obligation toward the person, as there has been a promise to stay together for the rest of their life or the impression that the other person needs this relationship and thus it would be unfair or detrimental to leave this person. The last component of the moral commitment is general consistency values. A couple stays together as they do not want to change anything in their life and therefore are not willing to modify their feeling, thinking, or acting. They could say: “Never change a winning team” (M. P. Johnson, 1991; M. P. Johnson, Caughlin, & Huston, 1999). Although moral commitment is based on the individual's internal beliefs, decisions based on moral commitment can be experienced as constraining rather than as freely chosen (Rusbult et al., 2006).

Structural commitment is not really felt when personal or moral commitment is high. However, when the other two components are low, structural commitment can be felt as constraints or barriers to leaving a relationship and therefore can be described as the feeling of being trapped in the relationship (M. P. Johnson, 1991; M. P. Johnson et al., 1999). Similar to Thibaut and Kelley (1959) and Rusbult (1980, 1983), Johnson also included the attractiveness of alternative relationships in his model. Economics, housing, employment, and children are important factors in a decision about relationship dissolution. Social pressure is a second type of constraint coming from friends, relatives, and other people, who might not approve of the ending of the relationship. Termination procedure is the third form of constraint, involving the difficulty in ending an intimate relationship due to legal and bureaucratic procedures, the need to divide possessions, and finding new housing. Irretrievable investment is the fourth and final set of constraints and concerns the time and resources which have been invested in a relationship. Some individuals may perceive these to have been well spent because they have had the reward, but others would be reluctant because they feel that they represent an unacceptable waste and therefore they would not leave even an unsatisfactory relationship.

Personal and moral commitment are functions of a person's own attitudes and values and are experienced as coming from the person (internal), whereas structural commitment is experienced as external to the individual, like a constraint which is independent of an individual's attitude. This constraint of structural commitment, regardless of the level of personal or moral commitment, makes it costly for the individual to leave the relationship (M. P. Johnson, 1991; M. P. Johnson et al., 1999).

In M. P. Johnson et al.'s (1999) study, the three components were not highly correlated with each other, so the authors concluded that they were independent dimensions. Personal commitment, rather than moral or structural commitment, was highly associated with global commitment. Adams and Jones (1997) compared six studies involving in total 1,787 participants and concerning empirical conceptualizations of marital commitment and

suggested three primary dimensions comparable with the multifaceted concept of the tripartite model. An attraction component is based on devotion, satisfaction, and love, which is comparable with personal commitment. A moral normative component is based on a sense of personal responsibility for maintaining the marriage and on the belief that marriage is an important social and religious institution; this which is comparable with moral commitment. A constraining component is based on fear of the social, financial, and emotional costs of relationship termination and is similar to the structural commitment proposed by M. P. Johnson (1991).

Personal dedication and constraint commitment

Stanley and Markman (1992) were influenced by the work of M. P. Johnson (1973, 1991), Levinger (1965, 1976), and Rusbult (1980, 1983); they devised a questionnaire which divided commitment into personal dedication and constraint commitment. *Personal dedication* is a desire to maintain or improve the quality of the relationship by sacrificing for it, investing, linking personal goals to it, and seeking one's partner's welfare not just one's own. Similar to structural commitment, *constraint commitment* refers to forces that constrain individuals to maintain the relationship due to external or internal pressure. The more individuals invest in their relationships, the higher are the barriers to leaving them. The authors say that "today's dedication is tomorrow's constraint" (Stanley & Markman, 1992, p. 597). The whole Commitment Inventory (CI) consists of 12 subscales with a total of 101 items and is a reliable and valid instrument with adequate internal consistencies for measuring commitment.

Desire to persist and inclination to maintain

Schoebi, Karney, and Bradbury (2012) claim that the desire for a relationship to persist (DP, similar to personal commitment or personal dedication) would function much like relationship satisfaction and constitutes a long-term orientation. The behavioral inclination to maintain the relationship (IM) would be independent of relationship satisfaction but lead to

higher persistence. In their longitudinal study over eleven years, they found that commitment is an important predictor in changes of relationship satisfaction and a central antecedent of relationship dissolution. Notably, only IM accounted for variability in reported steps toward termination independent of relationship satisfaction.

2.3. COM SEC: Emotional, cognitive, and sexual commitment

A new measure to assess commitment has been developed in this study (Bodenmann & Kessler, 2011). It is a short multidimensional, economical measurement of commitment, based on the theory introduced above (M. P. Johnson et al., 1999; Rusbult et al., 1998; Stanley & Markman, 1992). The most established approach (Arriaga & Agnew, 2001; Rusbult et al., 2004) considers commitment as an affective attachment to the relationship such that the strongly committed individual identifies with, is involved in, and enjoys taking part in this relationship. We therefore distinguish three different components: emotional, cognitive, and sexual commitment.

Emotional commitment is similar to Rusbult's (1980, 1983) affective commitment and refers to the dedication commitment developed by Stanley and Markman (1992) (e.g., "My goal is to be emotionally very close to my partner"). Emotional commitment is a psychological attachment. With increasing dependence, couples experience life in dyadic terms, such that their emotional well-being is influenced by their partner and relationship (Rusbult et al., 1998; 2004).

Cognitive commitment is similar to the long-term orientation of Rusbult (1980, 1983) and the "relationship agenda" subscale of the dedication items (Scott M. Stanley & Markman, 1992) (e.g., "My goal is to grow old together with my partner"). With increasing dependence, couples increasingly see themselves as involved in their relationships for the foreseeable future and take this into account when considering the implications of current action for future outcomes (Rusbult et al., 1998; 2004).

Sexual commitment is an adaptation of Rusbult's (1980, 1983) conative commitment and signifies the intention to persist with and limitation of sexual activity to the current relationship (e.g., "My goal is to be sexually faithful"). With increasing dependence, couples become intrinsically motivated to persist in the relationship and therefore try to be faithful if this is the couple's norm (Rusbult et al., 1998; 2004). We included this sexual component because of the importance of sexuality in intimate relationships. Amato and Hohmann-Marriott (2007) reported that in approximately 75% of the low-distress couples who divorce, one or both partners have already been involved with a new partner by the time of divorce. This is in line with Nock's (1998) view that sexual fidelity is one of the central defining norms of intimate relationships.

Partners who engage in extramarital sex report lower marital happiness and are at higher risk for divorce (Previti & Amato, 2004). More than 50% of partners who engage in extramarital sex separate or divorce afterwards (E. S. Allen & Atkins, 2012). Faithfulness is still important today, and a lot of young people think that commitment and sex is linked. A 19-year old male answered in a questionnaire: "Sex is an expression of deep feelings for another, a means of sharing one's self completely with another. Sex is connected with commitment in a relationship and should be exclusive" (Olmstead, Billen, Conrad, Pasley, & Fincham, 2013, p. 566).

Emotional, sexual, and cognitive commitment are best viewed as independent dimensions, rather than qualitatively different types, as people can experience each of these states to varying degrees. Some partners, for example, might feel both a strong emotional and cognitive commitment to remain in the relationship, but no intention to be faithful; others might feel a strong sexual and emotional commitment, but are young, are not planning into the far future, and therefore are not highly cognitively committed. The net sum of a person's commitment to the intimate relationship, therefore, reflects each of these separable states.

3. Coping with stress

In this chapter the impact of stress on intimate relationships is discussed and the different ways couples can cope with individual and dyadic coping.

3.1. Stress

The attributions couples ascribe to each other's transgressions covary with the amount of stress in their lives (Neff & Karney, 2004). When they experience less stress, they are more prone to give each other benefit; when they experience relatively high stress, they are more likely to blame each other for the same transgressions. Survey research has also indicated that there is a stronger association between decline of marital satisfaction and acute stressful events in lower income communities who experience a chronic stress in the form of financial strains than in more affluent ones (Maisel & Karney, 2012).

Over the last two decades, Bodenmann and his team have researched the detrimental impact of stress on relationship quality and satisfaction (Bodenmann, Charvoz, et al., 2007; Bodenmann & Cina, 2006; Bodenmann, Ledermann, & Bradbury, 2007). Stress is a powerful predictor of a partner's poor well-being, poor communication³, and divorce (see for an overview Bodenmann, 2000b, 2005). As ineffective management of daily hassles may produce conflicts and tension within the intimate relationship, it is not sufficient for interventions to focus only on the traditional communication and problem-solving skills. Negative consequences of stress on the relationship can be buffered by appropriate individual and dyadic coping skills (Bodenmann, 1998, 2000b). Maintaining a relationship requires significant efforts from both partners to achieve effective stress management (Bodenmann, Ledermann, et al., 2007). In general, support is linked with lower mortality rates from

³ In the EISI stress experiment (Experimentally induced stress in dyadic interactions), one or both partners were stressed, and the communication quality decreased between partners by 40%. They showed both less positive communication, and more verbal, non-verbal and paraverbal negativity (Bodenmann & Perrez, 1992).

cardiovascular disease (Berkman, Leo-Summers, & Horwitz, 1992; Brummett et al., 2001), cancer (Ell, Nishimoto, Mediansky, Mantell, & Hamovitch, 1992; Hibbard & Pope, 1993), and infectious disease (Lee & Rotheram-Borus, 2001).

3.2. Individual coping

Individual coping skills can be categorized as functional or dysfunctional coping strategies (Bodenmann, 2000). Functional coping skills include palliation, reframing, active influence, positive self-verbalization, information seeking, and seeking social support. Dysfunctional coping strategies include comparison with others, information suppression, negative palliation, blaming (self, partner, or others), negative emotional expression, avoidance, and rumination. A two-year longitudinal study by Bodenmann, Perrez, Cina, and Widmer (2002) revealed that couples who participated in Coping Enhancement Training (CET), a training program focused on individual coping skills, showed better functional coping skills, such as active problem-solving and positive self-verbalization, and they relied less often on dysfunctional coping strategies, such as rumination and blaming strategies compared to a control group.

3.3. Dyadic coping

Bodenmann (2000; 2005) posited a stress-coping cascade model in which both partners deal with the stressor first on their own (individual coping). If they do not succeed, the couple then tries to deal with the stressor together (dyadic coping). Bodenmann's view of dyadic coping is based on the transactional stress theory by Lazarus and Folkman (1984) and on process-related and systemic considerations (Bodenmann, 1995, 1997, 2005). The processual dimension of dyadic coping is represented by three factors: (1) the stress signals of partner A, (2) the perception of these stress signals by partner B and (3) partner B's reaction (Bodenmann, 1997, 2005). In contrast to stress, dyadic coping is related to higher relationship quality and satisfaction, lower risk of divorce, better communication, and higher individual

well-being, and is thus an important resource within the relationship (Bodenmann, 2000b, 2005; Bodenmann, Meuwly, & Kayser, 2011; Bodenmann, Pihet, & Kayser, 2006).

Dyadic coping has two beneficial components: The *stress-related component* refers to the experience of stress reduction and regulation of negative emotions when couples deal with stress. A *relationship-related component* following dyadic coping with stress as a couple strengthens the relationship and enhances the “we-ness” of the dyad (Bodenmann, 2008). Dyadic coping is the reaction of intimate partners to daily hassles, such as problems occurring in the social environment, like family and neighbors, or stressful situations at the workplace and the responses of the partner to these reactions (Bodenmann, 2005). These responses to individual and dyadic stressors can be supportive, delegated, negative, and common coping behaviors. Several studies have shown that dyadic coping is a stronger predictor of relationship satisfaction and that it yields unique contributions to relationship functioning, above and beyond contributions of individual coping strategies or social support from people outside the relationship (Herzberg, 2013; Papp & Witt, 2010).

4. Research questions

The aim of this thesis is to enhance a deeper understanding of the relations between commitment, coping, stress, and relationship satisfaction in couples. The thesis pursues two main research questions. Firstly, it examines how commitment and coping contribute to relationship satisfaction and, secondly, how commitment can be strengthened when partners perceive high levels of stress in their relationship. Further, moderation effects were examined to determine whether coping might compensate in cases of low commitment or high perceived stress in the relationship. Although commitment and coping are well studied in intimate relationships, there has been a lack of longitudinal research to date, and little is known about possible differences between age groups.

Two empirical contributions using data from the PASEZ Project⁴ address these gaps (cf. Chapters 5 and 6). A total of 368 couples (122 couples aged 20-35 years, 125 couples aged 40-55 years, and 121 couples aged 65-80 years) participated in the first wave of this longitudinal study. Study I is a cross-sectional analysis that examined whether common dyadic coping could compensate for low commitment in young, middle-aged, and old couples in stable relationships. Study II used data of the first and the second wave (a total of 300 couples completed the questionnaires at the second wave one year later) to investigate the role of individual and dyadic coping in the relationship between intradyadic stress and commitment in couples.

In the practical contributions (cf. Chapters 7 and 8), different prevention programs for couples and communication trainings for couples and families are discussed in detail. These programs and communication trainings (which are part of most prevention programs) aim to strengthen both the intimate relationships of couples and the close relationships between

⁴ "Impact of Stress on Relationship Development of Couples and Children: A Longitudinal Approach on Dyadic Development across the Lifespan." This study was funded by Swiss National Science Foundation (SNSF; CRSI11_133004).

family members. In times when relationships dissolve, even when the partners are low-distressed couples or quite satisfied couples, it is necessary not only to work on partnership disturbances but also on appropriate communication strategies, coping with stress, and problem-solving in preventive approaches with the aims of strengthening the relationship and deepening the partners' understanding of each other.

EMPIRICAL CONTRIBUTIONS

5. Study I:

In stable relationships, common dyadic coping compensates for low commitment in young, middle-aged, and old couples⁵

Abstract

Commitment is an important predictor of relationship stability and relationship satisfaction. Little is known, however, how dyadic coping could influence this link and whether different age cohorts vary. In 368 Swiss couples of three age cohorts (20-35, 40-55, 65-80 years) relationship satisfaction, commitment to their partners, and dyadic coping were assessed by means of questionnaires. Dyadic coping was examined as a moderator in the link between commitment and relationship satisfaction using Actor-Partner Moderator Model, and effects were compared between the age cohorts. We found significant effects of commitment on relationship satisfaction if participants scored low in common dyadic coping. We also found positive associations in the condition of high common dyadic coping except for women of the first and second age cohort. For young women and middle-aged women commitment seems to be unimportant for their relationship satisfaction if dyadic coping is high. For those women behavior in the intimate relationship (i.e., dyadic coping) might have a bigger impact on their relationship satisfaction than attitude (i.e., their commitment). Implications for therapy and prevention programs are discussed.

⁵ Paper by M. Kessler, G. Bodenmann, F. Nussbeck, V. Brandstätter, M. Martin, D. Sutter-Stickel, and T. Bradbury. The research project "Impact of Stress on Relationship Development of Couples and Children: A Longitudinal Approach on Dyadic Development across the Lifespan" has been funded by the Swiss National Science Foundation (SNSF; CRSI11_133004).

Introduction

The divorce rate is high in Western countries and around 50% in Switzerland (Federal Statistical Office, 2014a)⁶. This leads to an increased risk for all-cause mortality (Sbarra et al., 2011) and rising economic costs (Schramm et al., 2013). As people get older, the high divorce rate is a critical issue as it removes the usual primary source of help and support in the later years (Glaser et al., 2006). However, little is known about how common dyadic coping and commitment work together to stabilize romantic relationships across a wide age range. This is even more relevant since half of the divorces are, to the contrary of general expectations, between partners of low-distressed couples who appear to be reasonably untroubled (Amato & Hohmann-Marriott, 2007). Divorces of low-distress marriages are especially harmful as ex-partners experience a decrease in happiness after the divorce, whereas the inverse is true for high-distress couples. While a number of variables were detected as significant predictors of marital stability (Karney & Bradbury, 1995), such as positive behavior, marital and sexual satisfaction, or attitude and personal homogamy, commitment seems to be among the strongest predictors for dissolution (Le & Agnew, 2003; Le, Dove, Agnew, Korn, & Mutso, 2010), and in particular for the divorce of low-distress couples (Amato & Hohmann-Marriott, 2007).

Most conceptualizations of commitment are rooted in the interdependence theory, as a further development of the social exchange theory (Kelley & Thibaut, 1978; Levinger, 1976). Interdependence is a central structural property of relationships and is defined as the extent to which the behavior of one partner affects the behavior of the other and vice versa. As a basic assumption of the interdependence theory, partners within romantic relationships try to maximize their rewards (behaviors or situations that fulfill the needs and desires such as affection, belonging, security, companionship, intimacy, sexuality) while minimizing their

⁶ From 2011, the divorce statistics are no longer based on court judgments but on the computerized civil status register (Infostar). Information on divorces involving two spouses of foreign nationality is no longer available in the divorce statistics. Therefore we used the data from 2010.

costs (consequences that prevent partners from fulfilling their needs or desires such as worries for the partner, disturbing habits, arguments). If their needs and desires are fulfilled, partners feel satisfied and are pleased with the relationship. Another dimension of the theory is the quality of available alternatives. If the needs and desires could be better fulfilled by another partner, the likelihood of separation or divorce increases (Lewis & Spanier, 1979). Rusbult (1980, 1983) extended the interdependence theory by considering investments as the third factor. According to her investment model, the more a partner invests in a relationship, the higher are the costs of quitting because the invested resources (e.g., self-disclosure, time, friends, children, possessions) would decline in value, or even be lost completely if a separation took place. As a consequence of high relationship satisfaction, low quality of alternatives, and high investment, individuals become increasingly dependent on their relationships and gradually develop more commitment (Rusbult, Martz, & Agnew, 1998).

Le and Agnew (2003) declared dependence as the descriptive, structural state of a relationship and commitment as the psychological experience of that state. This psychological state has different components, such as intention to persist in a relationship (*conative commitment*), long-term orientation toward involvement (*cognitive commitment*), and psychological attachment (*emotional commitment*) (Arriaga & Agnew, 2001; Le & Agnew, 2003; Ostrom, 1969; Rusbult, Coolsen, Kirchner, & Clarke, 2006). While they are considered as important components, there might still be other influential components of commitment that have gained less or no attention so far, for instance, sexual commitment. Amato and Hohmann-Marriott (2007) reported that in approximately 75% of divorced low-distress couples, one or both partners were involved with an alternative partner before the divorce. This is in line with the view that sexual fidelity is one of the central defining norms of marriages (Nock, 1998). Therefore, apart from cognitive and emotional commitment, sexual commitment should be considered in a holistic approach of commitment in couples.

In a meta-analysis, Le and Agnew (2003) found significant correlations ($r = .47$) between commitment and stay-leave behavior. However, asking only one partner about his commitment is not sufficient as Oriña et al. (2011) found that relationship development depends more on the less committed partner (“weak-link partner”). Also, Schoebi et al. (2012) revealed that the likelihood of divorce was a function of the lower inclination to maintain the relationship. Although commitment not only influences the decision to persist, but also *everyday behavior* in relationships (Rusbult et al., 2006), and seems to play an important role in relationship functioning and maintenance, this variable has not received much attention in relationship education programs (RE) to date. Most evidence-based RE focus on the improvement of specific skills that have been found to be important predictors of relationship functioning, that is, dyadic communication, problem solving, self-regulation, or dyadic coping (Halford & Bodenmann, 2013). The most widespread evidence-based cognitive-behavioral RE, such as the Prevention and Relationship Enhancement Program (PREP; Markman, Stanley, & Blumberg, 2010), the Couple Commitment and Relationship Enhancement (CoupleCARE; Halford et al., 2006), and the Couples Coping Enhancement Training (CCET; Bodenmann & Shantinath, 2004), are primarily focused on behavioral training, and their main goal is to improve relationship skills. This emphasis builds on empirical evidence showing that the quality of communication is significantly associated with higher relationship satisfaction (e.g., Woodin, 2011). Similarly, dyadic coping (Bodenmann, Meuwly, & Kayser, 2011; Bodenmann, Pihet, & Kayser, 2006; Herzberg, 2013; Papp & Witt, 2010) and couple relationship self-regulation (Halford, Lizzio, Wilson, & Occhipinti, 2007) have consistently been found to be important predictors of relationship satisfaction.

Yet, one might argue that current RE may also indirectly enhance commitment through changing attributions after skill improvement. However, today we lack empirical knowledge about the interplay between skills for relationship functioning and commitment influencing relationship functioning. In this article, we examine the association between commitment and

relationship satisfaction, moderated by dyadic coping. The aim is to answer the question of whether RE should focus more on commitment or whether the focus on skills (i.e., dyadic coping) is appropriate in low as well as high committed couples. More precisely, we test how the level of dyadic coping (low / high) moderates the association of commitment (low / high) with relationship satisfaction. The results of our study should tell us where a skill-oriented approach in RE could be indicated or where commitment should be taken into consideration or if coping could compensate if the commitment is low. To answer this question, we chose dyadic coping as a moderator for the following reason. Partners' co-regulation of stress decreases the general stress level for each partner and strengthens the feeling of "we-ness", mutual trust, intimacy, and the perception that the relationship is a supportive resource in difficult circumstances (Bodenmann, 2005). Both dyadic coping and commitment focus on we-ness (Agnew et al., 1998). Their goal is therefore in some way similar although commitment represents rather an attitude, while dyadic coping represents a pattern of behavior. It has been shown that dyadic coping leads to increased relationship satisfaction (Herzberg, 2013) and that commitment is highly correlated with relationship satisfaction (Li & Fung, 2013), thus partners could interpret the dyadic coping as a behavioral cue for the partner's commitment. As it is not known if and how commitment and dyadic coping interact following scenarios are possible and fit different theoretical assumptions. On the one hand, it may be that couples with lower commitment benefit more strongly from higher dyadic coping with regard to their relationship satisfaction, meaning that dyadic coping may compensate low levels of commitment by its effects on trust and intimacy as well as being a supportive resource. It is also possible that couples with high commitment also benefit from high dyadic coping according to the model of mutual cyclical growth (Wieselquist et al., 1999), where dependence promotes commitment, which promotes pro-relationship acts, which is perceived by the partner and leading to enhanced trust which increases the willingness to become more dependent and committed to the relationship. Finally, couples might also be satisfied with

their relationship due to their commitment without an additional boost from dyadic coping, in which case an increase of the association between commitment and relationship satisfaction might not be observed. That is, in highly committed partners relationship satisfaction already is at the highest level with strong feelings of we-ness and trust so that dyadic coping may not exert an additional effect (comparable to a statistical ceiling effect). Therefore and based on the findings by Herzberg (2013) as well as Li and Fung (2013), we expect the lowest relationship satisfaction in couples with low commitment and low dyadic coping and the highest relationship satisfaction in case of high commitment and high dyadic coping.

Method

Participants

A total of 368 heterosexual couples were recruited by means of flyers, newspaper articles, and radio interviews. The final sample represents a community sample of the Swiss lower to upper middle class (Federal Statistical Office, 2014f). Inclusion criteria for study participation were being involved in a romantic relationship for at least one year. Furthermore, all couples were required to speak and understand German. Our sample was divided into three different age cohorts, where both partners had to belong to the same cohort. Youngest couples (1st cohort, $n = 122$) were aged from 20 to 35 years, women's mean age was 26 years ($SD = 4.57$), those of men was $M = 28$ years ($SD = 4.68$), their relationship duration ranged from 1 to 17 years ($M = 4.66$, $SD = 3.50$). The middle-aged couples (2nd cohort, $n = 125$) were aged from 40 to 55 years, women's mean age was 46 years ($SD = 4.51$), men's was 48 years ($SD = 4.28$), with a range of relationship duration from 1 to 38 years ($M = 18.32$, $SD = 9.68$). Older couples (3rd cohort, $n = 121$) were aged 65 to 80 years respectively, women's mean age was 70 years ($SD = 4.75$), men's age was 72 years ($SD = 5.11$), their relationship duration ranged from 3 to 60 years ($M = 42.74$, $SD = 12.37$). Most of the participants (65%) were married, about 6% were divorced and 65% of the participants had children. Concerning highest level of education stated 6% of the female that they finished mandatory school, over

41% of the females completed vocational training, 21% attended high school, and 32% graduated at university. Of the males, 3% attended mandatory school, 35% stated vocational training, 13% completed high school, and almost half (49%) finished university. Sixty-five percent of the women and 21% of the men earn between 0 and 40'000 Swiss Francs (= approximately 42'000 \$) per year, 27% (women) and 30% (men) earn between 40'000- 80'000 and the rest earns more than 80'000 Swiss Francs (average income is 67'000 Swiss Francs; Federal Statistical Office, 2014b).

Procedure

The interested participants contacted us via e-mail or telephone, and were screened for eligibility and informed about the study procedure. If suitable, we sent the informed consent form and a first set of questionnaires home to the couples, both partners were asked to complete the questionnaires independently from their partner. Additionally, couples were invited for a laboratory session, where they again were informed about the study protocol and signed the informed consent. During the laboratory session, both partners filled in three additional sets of questionnaires while being separated into two different rooms. Between the administration of questionnaires, the couples participated in three videotaped interaction sequences (will not be further discussed as data are not part of the present study). At the end of assessments, the couples were debriefed and received 100 Swiss Francs (=approximately 105 \$) as compensation for their participation. The study protocol was evaluated and approved by the local ethical committee.

Measurement

Commitment (COM SEC; Bodenmann & Kessler, 2011) is a questionnaire developed for this study with a six-item measure of commitment. The items assess emotional, cognitive, and sexual commitment (e.g., “My goal is to be emotionally very close to my partner / to grow old together with my partner / to be sexually faithful) and are rated on 7-point Likert scales from 1 (not at all) to 7 (very much). Internal consistency for this commitment scale was

good with Cronbach's $\alpha = .79$ (women) and $\alpha = .80$ (men). For the different Cronbach's α of three age cohorts see Table 1.

Dyadic Coping Inventory (DCI; Bodenmann, 2008) is a 37-item measure assessing the way how couples deal with stress. Nine subscales can be built and the items are rated on 5-point Likert scales ranging from 1 (never) to 5 (very often). For the current analysis, we used the subscale common dyadic coping as it represents the way partners deal symmetrically or complementary with stress to achieve a dyad relevant goal, which leads to we-ness and trust in the relationship. The subscale contains five items: "We try to cope with the problem together and search for ascertained solutions." "We engage in a serious discussion about the problem and think through what has to be done." "We help one another to put the problem in perspective and see it in a new light." "We help each other relax with such things like massage, taking a bath together, or listening to music together." "We are affectionate to each other, make love and try that way to cope with stress." The questionnaire is internationally used and has good psychometric properties. Internal consistency in the present study was $\alpha = .90$ for women, and $\alpha = .88$ men respectively.

The Relationship Assessment Scale (RAS; Hendrick, 1988; German translation by Sander & Böcker, 1993) was used to assess the global relationship satisfaction by seven items (e.g., "How satisfied are you with your relationship?" "How much do you love your partner?"). Items are rated on 5-point Likert scales from 1 (not satisfied) to 5 (very satisfied). Internal consistency was high with $\alpha = .82$ (women) and $\alpha = .86$ (men) for the whole sample (for more detailed information see Table 1).

Data analysis

In order to examine commitment, dyadic coping and the interaction thereof in predicting relationship satisfaction, we use the Actor-Partner Moderator Model (APMoM; Ledermann & Bodenmann, 2006). The APMoM is an extension of the standard Actor-Partner Interdependence Model (APIM; Kashy & Kenny, 2000) allowing for interaction effects of the

independent variables. In the APMoM (see Figure 8) there are two independent variables for each partner (commitment and common dyadic coping) influencing both partners' dependent variables (relationship satisfaction male and relationship satisfaction female). Additionally, the independent variables may interact with each other (depicted by the product term variables in Figure 8). Two multigroup models will be run: i) a model with main effects only and ii) the APMoM (see Table 3). We will compare the amount of explained variance to judge if the interaction terms add to the explanatory power of the independent variables. Additionally, we will report simple slopes. All analyses will be run using SPSS and AMOS Version 22 (Arbuckle, 2013).

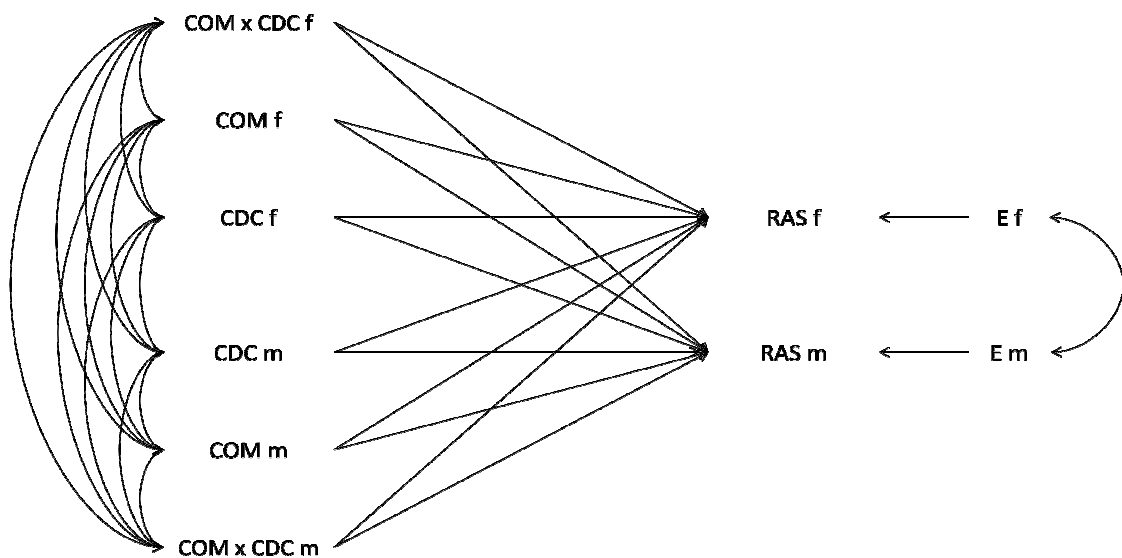


Figure 8. The actor-partner-moderation-model of commitment, coping, and relationship satisfaction.

Note. f = female, m = male, COM = commitment (predictors), CDC = common dyadic coping (moderators), COM x CDC = interaction terms, RAS = relationship satisfaction (dependent variable), and E = residuals.

Results

Descriptive Statistics

Descriptive statistics of all study variables are depicted in Table 1. Couples in this sample were rather satisfied with the romantic relationship (women: $M = 4.33$, $SD = 0.50$, men: $M = 4.37$, $SD = 0.49$), rather committed (women: $M = 6.36$, $SD = 0.73$, men: $M = 6.19$,

$SD = 0.81$), and showed common dyadic coping behavior *sometimes* to *often* (women: $M = 3.38$, $SD = 0.72$, men: $M = 3.44$, $SD = 0.67$). Using a multivariate analysis of variance (MANOVA) with sex as within factor and age cohort as between factor we tested for multivariate mean differences.

Table 1. Means, Standard Deviations, Internal Consistency, Test of Mean Differences across Gender, and Test of Mean Difference across Cohorts

Variable	Sample		Women			Men			Gender differences	
	Cohort	<i>n</i>	<i>M</i>	<i>SD</i>	α	<i>M</i>	<i>SD</i>	α	<i>t</i>	<i>p</i>
Commitment	1	122	6.31	0.78	.82	6.09	0.81	.78	2.99	.003
	2	125	6.22	0.78	.77	6.15	0.80	.82	0.78	.439
	3	121	6.56	0.58	.78	6.32	0.81	.83	3.25	.002
	All	368	6.36	0.73	.79	6.19	0.81	.80	3.91	.000
Cohort differences			♀ (1 = 2) < 3 **			♂ 1 = 2 = 3				
Common Dyadic Coping	1	122	3.53	0.65	.69	3.48	0.63	.66	0.67	.505
	2	125	3.23	0.66	.69	3.36	0.61	.71	-2.12	.036
	3	121	3.39	0.81	.84	3.49	0.76	.81	-1.27	.208
	All	368	3.38	0.72	.76	3.44	0.67	.73	-1.55	.122
Cohort differences			♀ 1 > 2**, 1 = 3, 2 = 3			♂ 1 = 2 = 3				
Relationship Satisfaction	1	122	4.36	0.48	.81	4.32	0.48	.81	1.01	.313
	2	125	4.32	0.48	.83	4.35	0.46	.84	-0.78	.435
	3	121	4.30	0.55	.89	4.45	0.52	.90	-3.77	.000
	All	368	4.33	0.50	.84	4.37	0.49	.85	-2.01	.045
Cohort differences			♀ 1 = 2 = 3			♂ 1 = 2 = 3				

Note. α : Cronbach's alpha (internal consistency); * $p < .05$, ** $p < .01$, *** $p < .001$.

Post hoc analysis of variance (ANOVA) with Bonferroni correction revealed that women from the 3rd cohort ($M = 6.56$, $SD = 0.58$) were significantly more committed than

women from the first ($M = 6.31$, $SD = 0.78$) and second cohort ($M = 6.22$, $SD = 0.78$), while women of the 1st and 2nd cohort did not differ from each other. Women from the 1st cohort ($M = 3.53$, $SD = 0.65$) reported significantly more common dyadic coping than women from the 2nd cohort ($M = 3.23$, $SD = 0.66$). Both groups of women did not differ from the women of the 3rd cohort ($M = 3.39$, $SD = 0.81$). There were no significant cohort differences in relationship satisfaction neither for women nor for men (women $M = 4.30 - 4.36$, men $M = 4.32 - 4.45$). Moreover, men of the three age cohorts did not differ neither in commitment ($M = 6.09 - 6.32$) nor in common dyadic coping ($M = 3.36 - 3.49$). Regarding gender differences, women from the 1st ($M = 6.31 > 6.09$) and 3rd cohort ($M = 6.56 > 6.32$) were more committed than their partners. In contrast, men from the 2nd cohort reported higher common dyadic coping than women ($M = 3.23 < 3.36$), however there are no gender differences for the 1st and 3rd cohort. With regard to relationship satisfaction, only men from the 3rd reported higher satisfaction than women ($M = 4.30 < 4.45$). There were no significant cohort differences in relationship satisfaction neither for women nor for men (women $M = 4.30 - 4.36$, men $M = 4.32 - 4.45$). Moreover, men of the three age cohorts did not differ neither in commitment ($M = 6.09 - 6.32$) nor in common dyadic coping ($M = 3.36 - 3.49$). Regarding gender differences, women from the 1st ($M = 6.31 > 6.09$) and 3rd cohort ($M = 6.56 > 6.32$) were more committed than their partners. In contrast, men from the 2nd cohort reported higher common dyadic coping than women ($M = 3.23 < 3.36$), however there are no gender differences for the 1st and 3rd cohort. With regard to relationship satisfaction, only men from the 3rd reported higher satisfaction than women ($M = 4.30 < 4.45$).

Correlations depicted in Table 2 show that most study variables are moderately to highly positive correlated except for all correlations between common dyadic coping and commitment in the 1st age cohort ($r = -.06 - .16$ ns). Interestingly, the female commitment was uncorrelated with the male relationship satisfaction ($r = .11$ ns.). In the 2nd age cohort the male coping - female commitment ($r = .15$ ns.) and female coping - male commitment ($r = .16$

ns.) were uncorrelated. The fact that common dyadic coping and commitment were only moderately or not correlated shows that the two constructs differ from each other. The highest correlations were between common dyadic coping and relationship satisfaction in all cohorts for men and women.

Table 2. *Bivariate Correlations among Study Variables*

Bivariate correlations						
Cohorts	Variable	1.	2.	3.	4.	5.
1	1. COM f					
	2. COM m	.46***				
	3. CDC f	.16	.16			
	4. CDC m	-.06	.12	.34***		
	5. RAS f	.37***	.31***	.49***	.21*	
	6. RAS m	.11	.35***	.34***	.37***	.61***
2	1. COM f					
	2. COM m	.32***				
	3. CDC f	.31**	.16			
	4. CDC m	.15	.29**	.42***		
	5. RAS f	.40***	.37***	.48***	.44***	
	6. RAS m	.28**	.60***	.29**	.51***	.56***
3	1. COM f					
	2. COM m	.34***				
	3. CDC f	.32***	.19*			
	4. CDC m	.25**	.32***	.39***		
	5. RAS f	.58***	.27**	.65***	.46***	
	6. RAS m	.41***	.53***	.51***	.52***	.68***
All	1. COM f					
	2. COM m	.38***				
	3. CDC f	.26***	.16**			
	4. CDC m	.12*	.25***	.39***		
	5. RAS f	.43***	.31***	.55***	.38***	
	6. RAS m	.26***	.50***	.38***	.47***	.61***

Note. Bivariate correlations COM = Commitment, CDC = Common dyadic coping, RAS = Relationship satisfaction, f = female, m = male, * $p < .05$, ** $p < .01$, *** $p < .001$, two tailed.

APIM and APMoM

In a first step, an APIM with commitment and common dyadic coping as independent variables was estimated. With this model, the following percentages of variance in relationship satisfaction could be explained. For women, 35% of the variation in RS could be explained in the first age cohort, 40% in the 2nd age cohort, and 61% in the 3rd age cohort. For men, 27%, 49%, and 52% of the variation in RS could be explained in the 1st, 2nd and 3rd age cohort respectively. In a second step, the APMoM (Table 3) including the two interaction terms of both partners' commitment and their perception of common dyadic coping, respectively, was estimated. For men and women in all three cohorts the interaction explains slightly more variance of the relationship satisfaction. For women 36% (+1%) in the 1st, 45% (+5%) in the 2nd, and 63% (+2%) in the 3rd age cohort could be explained; for men 28% (+1%) in the 1st, 55% (+6%) in the 2nd, and 55% (+3%) in the 3rd age cohort could be explained. Additionally, unstandardized model parameters associated to the effect of the interaction terms on the same partners' relationship satisfaction (actor effects) were significant for women and men in the 2nd and men in the 3rd age cohort. Furthermore, the interaction of women's commitment and their perception of common dyadic exert a significant influence on men's relationship satisfaction (partner effects) in the 2nd and 3rd age cohort (see Table 3). Hence, the influences of commitment and common dyadic coping on relationship satisfaction are not independent from each other but interact in middle and old couples.

Moreover, following Robinson, Tomek, and Schumacker (2013), simple slopes should be tested, even when the interaction term was not significant since the examination of simple slopes provides more information especially if the interaction effects and main effects are opposite in sign, which could lead to an incorrect interpretation of the main effects as average effects.

Table 3. Actor, Partner and Interaction Effects (Unstandardized Maximum Likelihood Estimates) for the Actor–Partner Moderator Model

Source	1st cohort	2nd cohort	3rd cohort
Main effect COM predicting RAS			
Actor effects			
Women → Women	.16**	.08	.38***
Men → Men	.18***	.24***	.21***
Partner effects			
Women → Men	-.01	.00	.13*
Men → Women	.08	.10*	-.02
Main effect CDC predicting RAS			
Actor effects			
Women → Women	.30***	.16**	.30***
Men → Men	.19**	.25***	.17***
Partner effects			
Women → Men	.14*	-.00	.19***
Men → Women	.05	.18**	.13**
Interaction terms COM * CDC			
Actor effects			
Women → Women	-.06	-.16**	-.14*
Men → Men	-.07	-.17**	-.04
Partner effects			
Women → Men	.01	-.12*	-.14*
Men → Women	-.02	-.08	-.05
Explained variance			
R^2_w Relationship satisfaction women	.36	.45	.63
R^2_m Relationship satisfaction men	.28	.55	.55

Note. Actor-Partner Moderator Models for the associations between commitment (COM), common dyadic coping (CDC), their interaction and relationship satisfaction (RAS). The table displays unstandardized regression coefficients of saturated models. To avoid multicollinearity we grand mean centered commitment and common dyadic coping before we calculated the interaction term. *** $p < .001$. ** $p < .01$. * $p < .05$.

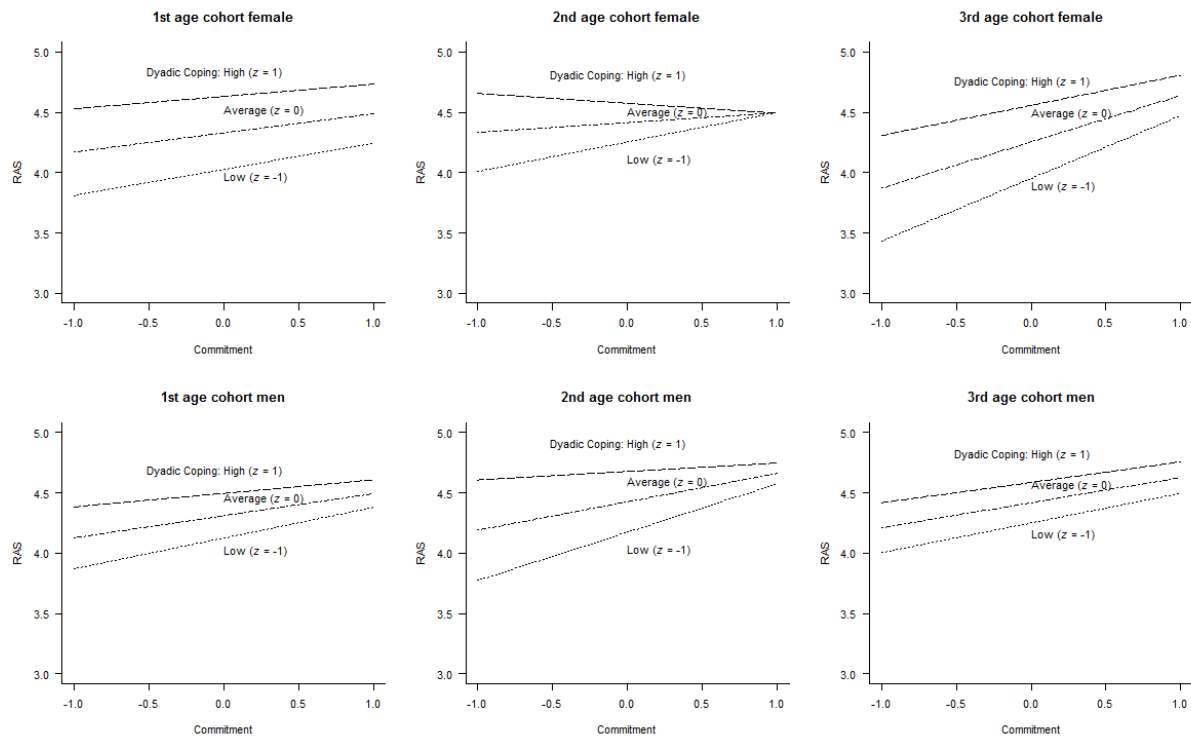


Figure 9. The effect of commitment on relationship satisfaction moderated by common dyadic coping.

Note. On the top are results of women from the 1st to the 3rd age group; below effects of men, low = -1 standard deviation; high = + 1 standard deviation, RAS = Relationship Satisfaction.

In order to interpret the two-way interactions, simple regression slopes were estimated, tested and plotted (see Figure 9) for low and high values of the moderator common dyadic coping (1 SD above and below the mean value of CDC) following Aiken and West (1991). If participants scored low in CDC, we found significant positive simple slopes of commitment on relationship satisfaction within one partner representing actor effects (women: 1st cohort: $b = .19$, $t(118) = 3.06$, $p = .003$; 2nd cohort: $b = .21$, $t(121) = 3.68$, $p < .001$; 3rd cohort: $b = .48$, $t(116) = 6.16$, $p < .001$; men: 1st cohort: $b = .22$, $t(118) = 3.53$, $p = .001$; 2nd cohort: $b = .35$, $t(121) = 6.93$, $p < .001$; 3rd cohort: $b = .24$, $t(116) = 4.74$, $p < .001$). We found almost no significant partner interaction effects, except for the 2nd cohort for both sexes and for men in the 3rd cohort (for women: 1st cohort: $b = .09$, $t(118) = 1.37$, ns ; 2nd cohort: $b = .16$, $t(121) = 2.12$, $p = .036$; 3rd cohort: $b = .01$, $t(116) = 0.27$, ns ; for men: 1st cohort: $b = -.01$, $t(118) =$

-0.21, *ns*; 2nd cohort: $b = .10$, $t(121) = 2.43$, $p = .017$; 3rd cohort: $b = .23$, $t(116) = 2.98$, $p = .004$).

If participants scored high in common dyadic coping, we found positive effects of commitment except for women of the first and second cohort (WOMEN: 1st cohort: $b = .11$, $t(118) = 1.19$, *ns*; 2nd cohort: $b = .00$, $t(121) = -0.01$, *ns*; 3rd cohort: $b = .27$, $t(116) = 3.18$, $p = .002$; MEN: 1st cohort: $b = .14$, $t(118) = 2.06$, $p = .041$; 2nd cohort: $b = .15$, $t(121) = 2.20$, $p = .024$; 3rd cohort: $b = .18$, $t(116) = 2.37$, $p = .020$). Finally, we found no significant partner effects in the condition with high dyadic coping (for WOMEN: 1st cohort: $b = .07$, $t(118) = 1.02$, *ns*; 2nd cohort: $b = .06$, $t(121) = 0.92$, *ns*; 3rd cohort: $b = -.05$, $t(116) = -0.71$, *ns*; for MEN: 1st cohort: $b = -.01$, $t(118) = -0.05$, *ns*; 2nd cohort: $b = -.06$, $t(121) = -0.99$, *ns*; 3rd cohort: $b = .01$, $t(116) = 0.15$, *ns*).

Overall and as expected, participants scoring high in common dyadic coping show higher relationship satisfaction than those with lower scores. Similarly highly committed participants show higher satisfaction than those with lower commitment except for women in the 2nd cohort with high common dyadic coping (see Figure 2).

Discussion

This study was designed to examine the interplay between commitment and dyadic coping influencing relationship satisfaction. The goal was to shed lights on where a skill-oriented approach in RE could be indicated or where commitment should be taken into consideration or if coping could compensate if the commitment is low. Based on a sample of 368 couples, representing three age cohorts (young couples 20-35 years, middle-aged couples 40-55 years, older couples 65-80 years), the role of low / high commitment and low / high dyadic coping for relationship satisfaction was examined.

Results show that commitment and dyadic coping are both relevant predictors of relationship satisfaction, and that these two predictors interact as shown by the incremental explanation of variance and the significance of interaction effects. As expected, dyadic coping

moderates the link between commitment and relationship satisfaction in men and women of the middle-aged cohort and elderly women. Simple slopes indicate that, for participants' low in common dyadic coping, differences in commitment are associated to differences in relationship satisfaction for all age cohorts. That is, for couples with low dyadic coping behavior, commitment is much more important for their relationship satisfaction than for those with high dyadic coping.

For those scoring high in common dyadic coping, the simple slopes were significant only for men of all three age cohorts and for women of the third age cohort. In other words, for young women and middle-aged women commitment seems to be not that important for their relationship satisfaction if dyadic coping is high. It seems that for women of the first age cohort dyadic coping might be more important to be satisfied in their relationship than commitment. Commitment is in general important in relationships, but these women may need concrete signs of commitment as could be reflected in dyadic coping. A partner engaging in common dyadic coping is therefore not only proving his commitment by investing into the relationship, but at the same time also helping to reduce stress and daily burden. For the women of the second age cohort the relationship satisfaction can be high, either because of high commitment or of high dyadic coping (and then even independent if their commitment is low or high). Elderly women (third age cohort) need this concrete signs coping less as they already have a long experience of the partner's support and are calibrated to it. It is, however, important to note that women in this sample were mainly in good health and did not depend on dyadic coping of the partner. It is assumable that the picture might look different in elderly couples with health problems where dyadic coping might again become more relevant above and beyond commitment.

According to Rusbult, Olsen, Davis, and Hannon (2004) strong commitment encourages a range of relationship maintenance mechanism to sustain long-term, well-functioning relationships. Those maintenance acts help couples to persist threats to their relationship like

uncertainty or tempting alternatives. Higher committed partners are thus expected to experience slower declines in satisfaction compared to partners less committed to maintaining the relationship. This is in line with our results that the spouses with high commitment show higher relationship satisfaction despite having a partner engaging less in common dyadic coping. For couples who report a high score of dyadic coping this effect is not that strong.

We further assume that there could be a circular or reciprocal mechanism behind, leading to higher commitment and dyadic coping for couples who are satisfied in their relationship and vice versa, as suggested by the model of mutual cyclical growth (Wieselquist et al., 1999). It is proposed to be a cyclical process; dependence promotes commitment, which promotes pro-relationship acts which are perceived by the partner, and therefore enhances his or her trust and for that reason increases the willingness to become dependent on the relationship. In addition to the aforementioned trust-based pathway, there could be a gratitude-based pathway, meaning that people who think about the investment that a partner puts into the relationship increases the awareness of the partners' value, and consequently makes people feel more grateful to have this partner in their life, which increases their commitment due to that evaluation (Joel, Gordon, Impett, MacDonald, & Keltner, 2013).

Dyadic coping might be seen as a form of investment into the relationship, especially in times of stress, and as a decision of the partner to sacrifice one's time for support instead of other more rewarding short-term activities (such as seeing friends, watching TV or just to have time for oneself). Thus, the partner demonstrates with dyadic coping in a tangible way visible commitment to the relationship in the day-to-day life together (Stanley, Whitton, Sadberry, Clements, & Markman, 2006), which seems particularly important in couples exposed to high stress in everyday life.

There are several limitations to the interpretation of our results. First of all, the middle class white, heterosexual couples do not stand for a representative sample of couples, so generalization to the larger population (i.e., including gay and lesbian couples, lower and

upper class couples) must be made with caution. Due to the facts that the couples had to be together for at least one year, that both partners had to fill in a rather extensive battery of questionnaires, and that they had to show up in the laboratory together, it is plausible to presume that only rather committed couples participated in the study - an assumption that is supported by the high mean of commitment scores and the relatively little variance. Hence, we may only speculate that effects could be stronger in highly distressed couples with lower overall commitment and less dyadic coping. Disentangling commitment into three components (emotional, sexual, and cognitive commitment) corresponds to the idea of multidimensionality (Le & Agnew, 2003; Ostrom, 1969; Rusbult et al., 2006). Although good psychometric properties have been found, definite statements about the validity of the questionnaires are precluded. In this study, we use self-report measures. Hence, we cannot exclude a common method bias producing some or parts of the reported associations. Nevertheless, for the interpretation and practical implications of our results, participants' own perceptions are the most important constructs. If these are biased in our study, they will also very likely be biased in participants' own (naive) evaluation of their relationship and, thus, operate very likely in the same way. Since we are using cross-sectional data, we cannot draw causal inferences. We do not claim that relations among the three constructs are simple and uni-directional, we speculate that these are more complex, and may even be bidirectional or reciprocal with feedback loops. For example, prior research has suggested that relationship satisfaction influences commitment (Rusbult, 1980, 1983). This notion does not contradict the model of reciprocal causation by Bandura (1986) stating that behavior, cognition and other personal factors, and environmental influences all operate as interacting determinants that influence each other bidirectionally. However, Frank and Brandstätter (2002) revealed in their longitudinal analyses that approach commitment predicted relationship quality such as satisfaction and emotions depending on the partner's presence positively, whereas avoidance commitment predicted them negatively which supports the direction of effects postulated in

this study. Furthermore they found as well a bidirectional influence between the partners, so that one partner's approach commitment predicted the other partner's relationship satisfaction, and vice versa, which is interpreted as kind of a mutual escalation of satisfaction and approach commitment.

Despite these limitations, there are also strengths of the study. First, it is the first study assessing the relationships among commitment, dyadic coping and relationship satisfaction in three age cohorts and thus shows that commitment is not only important within the context of relationship stability but also with regard to relationship satisfaction. Second, the relatively big sample size is allowing robust moderator analyses, yielding a more complex picture among associations between commitment, dyadic coping and relationship satisfaction. Third, findings seem important for relationship education as well as couple therapy and future research, as commitment has not yet been sufficiently considered in these approaches.

These findings support the assertion that commitment plays an important role for relationship satisfaction and that common dyadic coping moderates this association. This implies for clinicians to investigate whether couples who seek couple therapy or attend a relationship education workshop need to work on their commitment, dyadic coping, or both. Currently, most relationship education programs focus on teaching practical skills such as communication, problem solving or dyadic coping (Halford, 2011; Jakubowski, Milne, Brunner, & R. B. Miller, 2004) and targeting commitment directly is rarely done in these programs. While relationship education programs like Couples Coping Enhancement Training (CCET; Bodenmann & Shantinath, 2004) focus on strengthening dyadic coping, CoupleCARE (Halford et al., 2006) is among the only programs working on commitment by improving partner's self-regulation. A future question to address is, whether, when, and how intensity relationship educators and couple therapist need to address commitment, dyadic coping, or both and what tools they may use for trainings. While the CCET offers a specific technique with the 3-phase method (phase 1: partner A tells about a stressful event and tries to

explore the emotions while this concrete situation; phase 2: partner B gives positive emotional support; phase 3: partner A gives feedback to partner B regarding how satisfying the coping was) (Bodenmann & Shantinath, 2004), CoupleCARE provides worksheets and booklets for couples aiming at stimulating their personal reflections about what each partner can do for the best of the relationship. It is assumable that further tools may be developed regarding an enhancement of cognitive, emotional and sexual commitment as proposed in this study.

The enhancement of commitment and dyadic coping receives particular importance when couples experience specific stressors such as the transition to parenthood or when couples are facing extra dyadic affairs. In these situations couples need to rebuild mutual trust, closeness, and intimacy in their relationships and one question is whether this may happen by strengthening commitment directly or by teaching dyadic coping or both in a stepwise approach. One clinical implication of this study is that it might be worthy to assess both variables at the beginning of a treatment in an attempt to understand what direction the intervention could take. As the results of this study show that high dyadic coping may buffer low commitment in young and middle-aged couples, educators and therapists may also look at the age and phase of the couples in order to design a best tailored intervention. Future studies are needed to highlight many of these aspects in more detail.

6. Study II:

The role of individual and dyadic coping in the relationship between intradyadic stress and commitment in couples ⁷

Abstract

In previous research, commitment emerged as a strong predictor of the stability of intimate relationships. Maintaining a relationship requires efforts of both partners, e.g., in terms of their dyadic coping with stress. This research examined how couples deal with intradyadic stress and whether there are gender differences. A total of 300 heterosexual couples (age: 20-80 years) completed questionnaires assessing stress, individual and dyadic coping, and commitment at two times of measurement being one year apart. An actor-partner interdependence model revealed for both partners that the conditional main actor effect of intradyadic stress was negative, while the respective effects of dyadic coping was positively associated with commitment. The buffering interaction effect of individual coping was significant for men. As men are often flooded in conflicts, this suggests that high individual coping skills may prevent men from the detrimental impact that intradyadic stress has on their commitment. Implications for prevention and therapy will be discussed later in this paper.

Keywords: commitment, coping, intimate relationship, gender, stress, support

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Introduction

Commitment to a relationship or to the partner is a well-known predictor of relationship stability (Le & Agnew, 2003) and consists of three components: (a) psychological attachment, (b) long-term orientation, and (c) intention to persist (Arriaga & Agnew, 2001). According to Sternberg (1986), there is no commitment at the beginning of a relationship when (potential) partners meet for the first time. If a relationship is formed the commitment of the partners will increase gradually at the beginning and more rapidly if the relationship is to become a long term relationship. Typically, commitment then levels off with minor fluctuations. If individuals perceive that the partners commitment fluctuate more over time, they were more likely to be in relationship that ended eventually, in contrast to individuals whose perceptions remained relatively stable. This remained significant even when controlled for initial commitment level, and trend over time (Arriaga, Reed, Goodfriend, & Agnew, 2006). This assumption is consistent with Rusbult's (1983) notion that stable or even an increased level of commitment leads to lasting relationships, whereas a decrease in commitment tends to lead to separation.

According to the investment theory (Rusbult, 1980, 1983), commitment is strong if relationship satisfaction is high, the quality of available alternatives is poor, and the partner highly invested in the relationship. Commitment and cognitive interdependence (a mental state characterized by a pluralistic, collective representation of the self in a relationship; Agnew, Van Lange, Rusbult, & Langston, 1998) interact in a cycle of reciprocal influence, meaning that partners who are committed engage in relational maintenance behaviors (Rusbult, Olsen, Davis, & Hannon, 2004) which in turn intensify their relationship with their partners, resulting in greater cognitive interdependence, and, finally, to stronger commitment (Agnew et al., 1998).

Accommodation (Rusbult, Verette, Whitney, Slovik, & Lipkus, 1991), willingness to sacrifice (Van Lange et al., 1997), and forgiveness (Finkel et al., 2002) are typical examples

of relationship maintenance behaviors. Yet, also, individual coping but also supporting the partner and joint coping efforts in times of stress (dyadic coping) can be seen as relationship maintenance behaviors. Individual coping may be such a behavior because partners may protect their relationship from detrimental effects of their own stress. Supporting the partner in times of stress or dealing with a jointly experienced stressor clearly shows that one or both partners are willing to invest in the relationship by taking care of it.

Yet, stress itself has a detrimental effect on commitment. Lavner and Bradbury (2012) found that chronic everyday stress is negatively correlated with commitment. This may be explained by the facts, that stress negatively impacts relationship satisfaction (Brock & Lawrence, 2008; Lavner & Bradbury, 2010) which is a component of commitment. Further that distressed partners invest less in positive communication behaviors (e.g., agreeing, smiling, using humor) but more often show negative communication behaviors (e.g., blaming, belligerence, complaining, criticizing, withdrawal) than non-distressed partners (see Bradbury & Karney, 2010, for a review) and *extradyadic stress*, that is stress from outside the relation, leads to a less adaptive processing of daily relationship experiences (Neff & Karney, 2009). In addition, extradyadic stress may spill-over into the relationship (*intradyadic stress*) as could be shown by Bodenmann, Ledermann, and Bradbury (2007). This implies that unresolved stressful situations experienced by one partner can affect and put stress on the other partner as well (e.g., via less favorable communication by the first partner, more displays of problematic behaviors). Extradyadic stress from daily hassles relates indirectly to lower relationship satisfaction through increased intradyadic stress from relationship problems (Falconier, Nussbeck, Bodenmann, Schneider, & Bradbury, 2014). In a longitudinal study, the general stress level (intradyadic and extradyadic) reported by female partners was a significant predictor of their relationship stability, even over the course of ten years (Ruffieux, Nussbeck, & Bodenmann, 2014).

However, the negative impact of extradyadic stress on relationships (e.g., Bodenmann, Meuwly, Bradbury, Gmelch, & Ledermann, 2010; Meuwly et al., 2012) but also on intradyadic stress (Brock & Lawrence, 2008) can be buffered by adequate *coping* strategies. Individual coping, that is one's own and self-sufficient coping, but more importantly, dyadic coping, that is the couple's joint efforts to deal with the stressor or the support they give each other to free resources (see Bodenmann, 2000, 2005), are related to higher relationship satisfaction (Bodenmann et al., 2011; Herzberg, 2013; Papp & Witt, 2010; Wunderer & Schneewind, 2008), and relationship stability (Bodenmann & Cina, 2006). Dyadic coping additionally buffers detrimental effects of stress on relationship functioning (Falconier, Nussbeck, & Bodenmann, 2013).

Yet, the picture is less clear for intradyadic stress. In principle, being stressed within a relationship leads to a decline in satisfaction with the relationship (Bodenmann, Ledermann, & Bradbury, 2007; Falconier, Nussbeck, Bodenmann, Schneider, & Bradbury, 2014) at least in the short term but it may, if the couple adequately solves the problem result in higher relationship satisfaction. This latter effect may be due to the fact that intradyadic stress which directly originates in the relationship (e.g., arguments about closeness and distance in the relationship) can reflect spouses' engagement in their relationship and can, if being solved, lead to more closeness, enhanced relationship satisfaction, and more relationship quality in the long run (Cohan & Bradbury, 1997; Li & Fung, 2013). This effect may be explained with the personal growth model (Schaefer & Moos, 1992): Challenging and hence stressful events can provide couples with possibilities to get to know each other better and to learn about the potentials of support provision in their relationship, therefore, challenging events deepen their commitment and intimacy, which in the long run has positive effects on mood and relationship satisfaction. Hence, stress may have a double impact on relationships and relationship commitment. It may, as a direct main effect, be detrimental for a relationship,

but, if the couple can adequately cope with stress, be beneficial due to the growth of intimacy and commitment.

However, research is limited when trying to understand how social support, especially support from the spouse in intradyadic stress, affects commitment. Burke and Segrin (2014) found an indirect effect of people's commitment on their stress through increased loneliness. Canary and Stafford (1992) revealed that self-reported as well as perceptions of partners' maintenance strategies (coping can be seen as such a strategy) and perceptions of the partners' sharing tasks predicted commitment of both partners.

In this study, we aim to contribute to the understanding of the interplay between intradyadic stress, maintenance behaviors (i.e., individual and dyadic coping), and commitment. In particular, we will investigate, if stress is affecting commitment and if this effect can be buffered by i) individual coping alone (model 1), ii) dyadic coping alone (model 2), or iii) the individual and dyadic coping (model 3).

Method

Recruitment and procedures

The complete procedure and recruitment strategy was approved by the local ethical committee of the University of Zurich. This study was advertised in articles in newspapers, reports on the radio, and (online) as a longitudinal study on the impact of stress on relationship development in couples. Interested couples could contact the researchers and were called back by phone. During this phone call, they were informed about the main goals of the study and their eligibility was examined (possible participants had to be in their current relationship for at least one year and they had to communicate in German language). During the assessment in the laboratory, both partners completed a set of questionnaires independently from each other being separated in two rooms.

Finally, the couple received closing information, and 100 CHF as financial compensation. Approximately 10 months later, the couples were contacted again to invite

them for participation in the 2nd wave of the study to be scheduled approximately one year after the first assessment. The assessment procedure remained exactly the same as for the first measurement occasion with the only difference that the couple received 120 CHF as financial compensation. In the second wave, 300 out of the 368 couples participated again in our study. The 68 couples who did not participate in the second wave did not differ from the participating couples concerning age, relationship duration, or any of the main study variables investigated in this paper. However, the dropout couples did differ concerning having children, marital status, income, and education. Married and well educated couples with children, and men with higher income participated more often in the second wave.

Participants

Participants for this study initially were 368 heterosexual couples between 19 to 82 years, mean age of women was 47 years ($SD = 18.38$), mean age of men was 49 years ($SD = 18.31$). The average relationship duration was 22 years ($SD = 18.25$, range = 1 - 60 years), and 66% were married and 65% had children. As highest level of education 40% of the women, and 35% of the men, completed vocational training, 31% of the women, and 49% of the men, completed college or university. All other participants attended mandatory school (women: 6%, men: 3%), or completed high school (women: 21%, men: 13%). Most of the women (63%) and 31% of the men had an average yearly income between 1 and 60'000 Swiss francs (CHF) (= approximately 62'000 \$). For 17.6% of the women, and 48.3% of the men, it was between 60'001 and 120'000 CHF, and 1.4% of the women, and 16.8% of the men, had a higher income. During the time of data collection, the average income in Switzerland was 67'000 CHF lending the sample representative of the Swiss lower to upper middle class in terms of income (Federal Statistical Office, 2014c).

Measures

Stress: Chronic relationship stress was assessed using a subscale of the *Multidimensional Stress Questionnaire for Couples* (MSQ-P; Bodenmann, Schär, & Gmelch,

2008a). Participants rated their experience of intradyadic micro stressors during the last 12 month on 10 items of a four-point Likert scale ("1 = not at all" to "4 = strong"). Sample micro stressors are disagreement with the partner, different goals, difficult personality, or behavior of the partner. Higher scores indicated higher levels of stress. Overall, the internal consistency was good (at 1st wave: Cronbach's $\alpha = .83$ for women and $\alpha = .81$ for men).

Individual coping: The INCOPE (Bodenmann, 2000; Bodenmann, Perrez, Cina, & Widmer, 2002) assesses individual coping in stressful situations with 23 items. Items are administered on a five-point Likert scale ("1 = never" to "5 = very often"). The questionnaire includes both functional and dysfunctional forms of coping. The total score was derived by reverse-scoring responses for dysfunctional strategies (smoking, drinking alcohol, eating sweets, rumination, avoidance, blaming), and adding them to the functional strategies (self-soothing, exercising, meditation, humor, positive reinterpretation, search for support). The Cronbach's for the entire scale for the 1st wave was $\alpha = .71$ for women and $\alpha = .73$ for men.

Dyadic coping: The Dyadic Coping Inventory (DCI; Bodenmann, 2008) assesses the way how couples deal with stress with 37 items. Items are rated on five-point Likert scales ranging ("1 = never" to "5 = very often"). In principle, the DCI comprises ten subscales of dyadic coping, yet, the DCI also allows for a calculation of a total score combining the functional forms of dyadic coping (delegated: "I take on things that my partner would normally do in order to help her / him out", supportive: "I show empathy and understanding to my partner", and common dyadic coping: "We help one another to put the problem in perspective and see it in a new light") and the inverse scored dysfunctional forms (negative dyadic coping: "My partner does not take my stress seriously") as provided by oneself (self-report of partner A) and the partner (partner report of partner A). The internal consistency was good with $\alpha = .89$ for women and men respectively for the 1st wave.

Commitment: The COM SEC is a short questionnaire with only six items that was developed for this study to measure commitment (COM SEC; Bodenmann & Kessler, 2011). The items assess emotional, cognitive, and sexual commitment (e.g., "My goal is to be emotionally very close to my partner / to grow old together with my partner / to be sexually faithful) on a 7-point Likert scale ("1 = not at all" to "7 = very much"). Internal consistency was good with Cronbach's $\alpha = .79$ for women and $\alpha = .80$ for men at the 1st wave and $\alpha = .86$ and $\alpha = .85$ at the 2nd wave.

Statistical Analyses

According to the research questions investigating the buffering effects of individual and dyadic coping, we ran three different Actor-Partner-Moderator Models (APMoM; Ledermann & Bodenmann, 2006). Actor-partner interdependence models take the interdependence of a dyad into account (Cook & Kenny, 2005). Actor effects describe the impact of the criterion on the outcome variable of the same person, while partner effects describe the impact of partner's A criterion variable on Partner's B outcome variable, and partner's B criterion variable on Partner's A outcome variable, respectively. Figure 10 presents the complete model 3 incorporating stress, individual as well as dyadic coping and the interaction terms of coping behaviors with stress. Model 1 includes the same variables except for dyadic coping and its interaction with stress; in model 2, all effects (main and interaction) of individual coping are removed. This series of analyses allows for determining the incremental impact of individual or dyadic coping, respectively on commitment. Following the approach by Lavner and Bradbury (2012), who conceptualized commitment as an average score across three occasions of measurement as there is a considerable stability in commitment, we conceptualized commitment as latent variable across the two waves of measurement. All models were calculated in MPlus (Muthén & Muthén, 1998-2012) with grand mean centered variables to avoid multicollinearity.

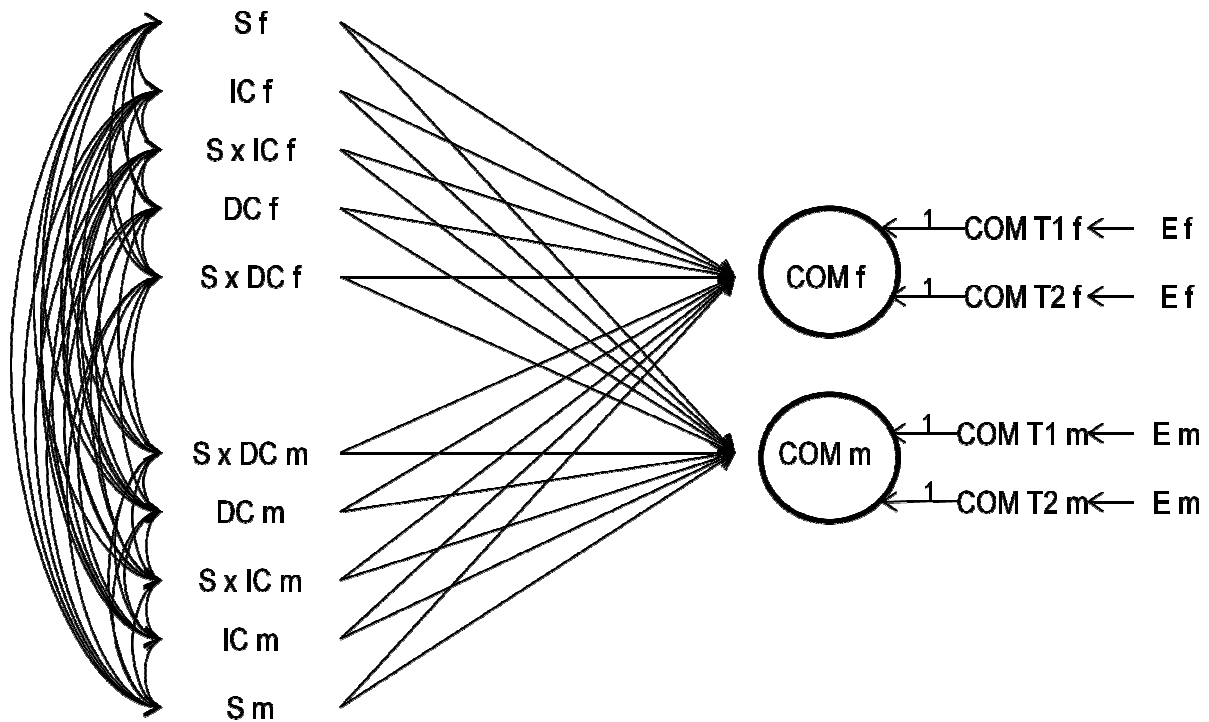


Figure 10. The actor-partner-moderation-model (APMoM) of stress, coping, and commitment.

Note. f = female, m = male, S = intradyadic chronic stress (predictor), IC = individual coping (moderators), DC = dyadic coping (moderators), Stress x IC and Stress x DC = interaction terms, COM = commitment (dependent variable), T1 = wave 1, T2 = wave 2, and E = residuals.

Tests of moderation

For all three models, we first assessed an unconstrained (saturated) APMoM, allowing all parameter to vary freely between women and men. In order to simplify the APMoM and to test for gender differences, we gradually restricted all path-parameters to be equal across gender to identify the most parsimonious fitting model. We relied on the following goodness-of-fit criteria indicating good fit: χ^2 value with $p > .05$; Comparative Fit Index (CFI) $> .97$; Root Mean Square Error of Approximation (RMSEA) $< .05$, and Standardized Root Mean Square Residual (SRMR) $< .05$.

Results

Preliminary analyses

Descriptive statistics of the model variables (chronic intradyadic stress, individual and dyadic coping, and commitment to wave 1 and 2) can be found in Table 4. Couples in this

sample reported rather high levels in relationship commitment in wave 1 (women: $M = 6.36$, $SD = 0.73$, men: $M = 6.19$, $SD = 0.81$), and still one year later in wave 2 (women: $M = 6.30$, $SD = 0.91$, men: $M = 6.18$, $SD = 0.88$). They rated little intradyadic chronic stress in the previous 12 months (women: $M = 1.87$, $SD = 0.53$, men: $M = 1.76$, $SD = 0.47$), with coping behavior from *sometimes* to *often* (individual: women: $M = 3.47$, $SD = 0.38$, men: $M = 3.57$, $SD = 0.38$, dyadic: women: $M = 3.76$, $SD = 0.50$, men: $M = 3.83$, $SD = 0.44$).

Table 4. Means, Standard Deviations, Reliability and T-Tests of Study Variables for Women and Men

Variables	Range	Women			Men			<i>t</i>
		<i>M</i>	<i>SD</i>	α	<i>M</i>	<i>SD</i>	α	
Intradyadic chronic stress	(1-4)	1.87	0.53	.83	1.76	0.47	.81	4.31***
Individual coping	(1-5)	3.47	0.38	.71	3.57	0.38	.73	-3.60***
Dyadic coping	(1-5)	3.76	0.50	.89	3.83	0.44	.89	-2.79**
Commitment wave 1	(1-7)	6.36	0.73	.79	6.19	0.81	.80	3.91***
Commitment wave 2	(1-7)	6.30	0.91	.86	6.18	0.88	.85	2.26*

Note. α = Cronbach's alpha (intradyadic consistency). * $p < .05$, ** $p < .01$, *** $p < .001$.

Women reported significantly higher scores in intradyadic chronic stress and commitment in waves 1 and 2 than men. Men reported significantly higher individual and dyadic coping skills compared to women. The correlations among the study variables are shown in Table 5 and were weak to moderate. Commitment was strongly correlated over time (women: $r = .74$ and men: $r = .69$), individual and dyadic coping were moderately correlated (women: $r = .32$ and men: $r = .35$). Intradyadic chronic stress was negatively correlated with all other study variables ($-.54 < r < -.24$).

Table 5. *Bivariate Correlations among Study Variables*

	1.	2.	3.	4.	5.
1. Intradyadic chronic stress	.48***	-.30***	-.54***	-.31***	-.30***
2. Individual coping	-.33***	.08	.32***	.15**	.17**
3. Dyadic coping	-.53***	.35***	.50***	.26***	.22***
4. Commitment wave 1	-.32***	.24***	.39***	.38***	.74***
5. Commitment wave 2	-.24***	.19**	.24***	.69***	.43***

Note. Bivariate correlations for women's scores are displayed above the main diagonal; those for men are displayed below the main diagonal. Correlations of women's and men's scores of the same variable are depicted in italics on the main diagonal. * $p < .05$, ** $p < .01$, *** $p < .001$ (two tailed).

Individual coping

In model 1, we tested whether the link between intradyadic chronic stress and commitment was moderated by individual coping. The restricted model (all paths parameters were set equal across sexes except for those including individual coping) fitted well to the data ($\chi^2 = 32.096$, $df = 23$, $p = .098$, CFI = 0.985, RMSEA = .033, SRMR = .031), hence, we did not find any gender differences with respect to the path coefficients (see Table 6).

We found significant negative path coefficients within partners (actor effects) predicting commitment with intradyadic stress. Perceived intradyadic stress was only predicting marginally the other partner's commitment (partner effect). Individual coping did not predict commitment except for men. If men are good individual copers, they are more committed to their relationship and furthermore, men's individual coping competencies buffer the negative effect of intradyadic stress on commitment (see Figure 11). In this model, 13% of the variance in commitment for women can be explained and 23% for men.

Dyadic coping

In model 2, we tested whether the association between intradyadic chronic stress and commitment is moderated by dyadic coping. The completely restricted model fitted well to the data ($\chi^2 = 37.087$, $df = 25$, $p = .057$, CFI = 0.979, RMSEA = .036, SRMR = .032) implying

no gender differences (see Table 6). Again intradyadic chronic stress was significantly negatively associated with commitment for both partners, yet, in this model, actor and partner effects were significant, meaning that the stress of the one partner is associated to the other partner's commitment and vice versa. Dyadic coping was associated to commitment within individuals (actor effects). In this model, 16% of the variance in commitment for women can be explained and 14% for men.

Individual and dyadic coping.

In model 3, we tested if individual and dyadic coping are both relevant for commitment and as moderators buffering the detrimental effect of stress when the two forms of coping control each other's influence statistically (see Figure 10). In contrast to the previous model 2, model 3 did not allow for completely restricted path coefficients. All path coefficients could be set equal to each other except for the effects of individual coping and the interaction including individual coping ($\chi^2 = 45.418$, $df = 35$, $p = .112$, CFI = 0.983, RMSEA = .028, SRMR = .027). The model fit was significantly worse if we set the paths of individual coping, the interaction of stress, and individual coping equal, meaning the those paths are not the same for men and women. The model fit was good for this restricted model where the paths of individual coping and the interaction of individual coping and intradyadic stress were able to vary freely.

Again intradyadic stress was detrimental for women and men for their commitment, and dyadic coping was significantly associated with commitment. For women, dyadic coping seems to be important for their commitment as shown by the significant path coefficient. For men, their individual and dyadic coping are important. Interestingly, only the interaction effect of individual coping with intradyadic stress for men turned to significance, all other interaction terms failed to reach significance. In this model 3, 14% of the variance in commitment for women can be explained and 25% for men.

Table 6. Actor, Partner, and Interaction Effects (Unstandardized Maximum Likelihood Estimates) for the three Restricted Actor–Partner Moderator Models

	Model 1	Model 2	Model 3	
Main effect chronic stress predicting COM				
Actor effects				
Women → Women	-.29***	-.32***	-.25***	
Men → Men	-.29***	-.32***	-.25***	
Partner effects				
Women → Men	-.11†	-.14*	-.08	
Men → Women	-.11†	-.14*	-.08	
Main effect coping predicting COM				
Actor effects			IC	DC
Women → Women	.09	.20**	.07	.15*
Men → Men	.33**	.20**	.31**	.15*
Partner effects				
Women → Men	.18†	.14†	.16†	.11
Men → Women	.18†	.14†	.16†	.11
Path coefficients of the interaction terms Stress * Coping				
Actor effects			IC	DC
Women → Women	-.13	.17†	-.20	.13
Men → Men	.48**	.17†	.41*	.13
Partner effects				
Women → Men	-.07	.00	-.07	-.01
Men → Women	-.07	.00	-.07	-.01
Explained variance				
R^2_w Commitment women	.13	.16	.14	
R^2_m Commitment men	.23	.14	.25	

Note. Actor-Partner Moderator Models for the associations between intradyadic chronic stress, individual and dyadic coping, their interaction and commitment. The table displays unstandardized regression coefficients of restricted models. † $p < .10$, * $p < .05$, ** $p < .01$, *** $p < .001$.

Discussion

With this study, we explored the association between intradyadic chronic stress, individual and dyadic coping on commitment as a latent variable. The aim was to shed light on the link between intradyadic stress and commitment, and to examine whether individual and dyadic coping could buffer the detrimental influence of intradyadic stress on commitment.

In order to account for interdependence between couples, we used dyadic analysis in the form of actor-partner-moderation models, a special form of actor-partner-interdependence-models. A total of 300 couples out of 368 couples from the first wave completed questionnaires on stress, individual and dyadic coping, and commitment at two times of measurement being one year apart. Women reported significantly higher intradyadic chronic stress and commitment at both waves than men, who reported higher individual and dyadic coping than women. Nonetheless relationship commitment was high at both measurement occasions, couples experienced rather low levels of intradyadic stress. Correlations between study variables were weak to moderate, with high correlations between commitment at wave 1 and wave 2. Intradyadic chronic stress in all three models was negatively associated (actor path) with the latent (average) commitment across waves 1 and 2. The partner paths were significant for model 2 and marginally for model 1. This result is consistent with the results of Lavner & Bradbury (2012) that chronic stress was negatively correlated with husbands' and wives commitment (also measured in their study as an average measure across times 1-3).

In model 1, with individual coping as moderator, we found a significant positive actor effect of the male coping to the male commitment, whereas, this path was not significant for women. For men, the interaction effect of their individual coping with their intradyadic stress was significant. In Figure 11, it is shown that individual coping buffers the detrimental effect of intradyadic chronic stress on commitment. In model 2, with dyadic coping as moderator, we found significant actor effects of dyadic coping on commitment. No significant interaction

and no partner effects were found. This result shows that dyadic coping is beneficial for commitment as expected due to its nature of maintenance behavior but it is not able to buffer the detrimental effect of intradyadic stress on commitment. This model explained slightly more variance for the commitment of the women, but much less for the men. The results of model 3, with individual and dyadic coping as moderators, were quite similar to the other two models, and revealed that individual coping is important for men. Dyadic coping is significantly associated with commitment for men and women (actor effects). Among the four interaction effects, only the male interaction effect between intradyadic stress with the individual coping was significant. This signifies that individual coping, even controlled for dyadic coping is an important predictor for commitment and can even buffer intradyadic stress for men. Women seem to profit more from dyadic coping and not from individual coping for their commitment.

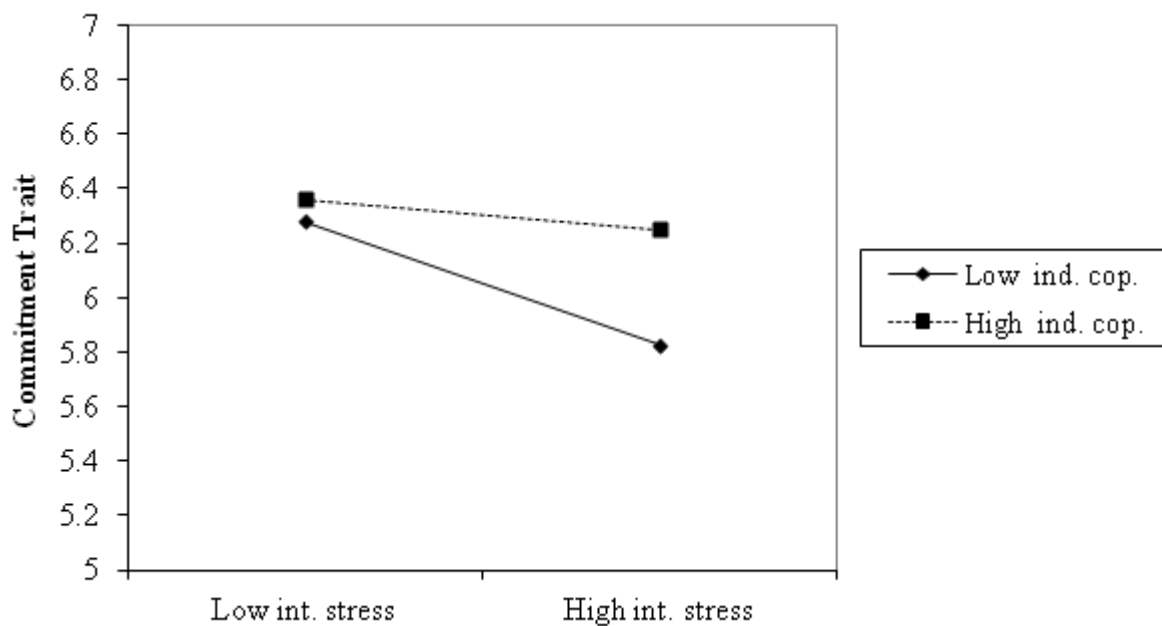


Figure 11. The effect of intradyadic chronic stress on commitment moderated by individual coping for men.

Note. low = -1 standard deviation; high = + 1 standard deviation, ind. cop. = individual coping, int. stress = intradyadic chronic stress.

A possible explanation for the gender differences regarding the importance of individual coping for men could be explained with the social psychophysiological explanation of the *cascade model of marital dissolution* (Gottman & Levenson, 1988, 1992). Men seem to react more physiologically to negative affect, and to other stressors than women, especially when they think that their partner's negative emotion is unexpected, intense, overwhelming, and unprovoked. The distance and isolation cascade (Gottman, 1993) begins with *flooding*, which is kind of a hypervigilance to ambiguous cues which are conditioned (such as a conflict) as being threatening or frustrating. This goes with the interpretation that the problems in the relationship are severe, and it would be better to work out the problem alone. Therefore the goal of the flooded person is to do anything to terminate the interaction, such as avoiding the partner. Men are flooded by less intense negative affects and behaviors than women. The sympathetic system then gets activated as part of the autonomic nervous systems, and arouses the body for action in the sense of 'fight or flight' (Cannon, 1932) as a primary response, while women engage more in 'tend and befriend' behaviors, such as interpersonal affiliation and nurturance (Taylor et al., 2000). Stress responses of the 'fight or flight' response are not only behavioral, but also physiological (Kolb & Whishaw, 2005). This physiological activation releases norepinephrine into the circulatory systems, and prepares the body for a sudden burst of activity, like the 'fight or flight' response. This procures symptoms of increased heart rate, sweating, and digestive functions are turned down. This is resulting in a reduction of cognitive functioning, such as problem-solving, planning, and creative thinking. It takes some time until all the stress-related hormones are removed from the system, which affects the couple's ability to resolve conflicts. High level of physical arousal before and during conflict has been shown to be predictive of declines in satisfaction (Levenson & Gottman, 1985). Marital dissatisfaction was associated with increased physiological linkage between partners and increased negative affect.

Aforementioned 'tend and befriend' behavior of the women appears to draw on the attachment / caregiving system. That tending involves nurturing activities to promote safety, to protect the self and the offspring, and to reduce distress, while befriending is the creation and maintenance of social networks to have access to social support and to reduce risk (Taylor et al., 2000). As for the 'fight or flight' response there seems to be as well an underlying neuroendocrine pattern with oxytocin in conjunction with female reproductive hormones and endogenous opioid peptide mechanisms. This is also in line that mothers' and fathers' responses to offspring under stress show a different pattern, when they had an interpersonally conflictual day at work. Men withdraw from their families (Repetti, 1989), while women were more caring, show more love and nurturance toward their children on stressful workdays (Repetti, 1997). Females are more prone to affiliate with others under conditions of stress than men (Belle, 1987). Females are more likely their entire life to seek out social support, especially from similar others, like other female relatives or female friends. As a result they receive more support, and are also more satisfied with the support they receive (Belle, 1987; Wethington, McLeod, & Kessler, 1987).

The results are further in line with Gottman und Levenson (1992) that non-regulated couples were more conflict engaging, stubborn, angry, whining, defensive, and withdrawn as listeners. A high level of physiological arousal during conflicts was a strong predictor of declines in relationship satisfaction. The authors interpret that women take more responsibility for the emotional stability in a relationship and for keeping focused on the problem-solving task throughout the conflict. They tend to place a higher value on talking things over than do men, and men rather react with withdrawal. If this is the case, than it is important that they somehow try to deal with their emotional flooding by individual coping. Our data suggests that this helps men to keep their commitment high. In summary, this could mean that men show a higher physiological reactivity compared to women, so women

seemingly function more effectively during negative affect, while men are more likely to withdraw and stonewalling.

For women, the mechanisms seem to be different than for men. Individual coping was not significantly associated with commitment, but dyadic coping was. Self-disclosure (process of verbally revealing information about oneself, including thoughts, feelings, and experiences) seems to be much more important for women in intradyadic stress situations (Derlega, Metts, Petronio, & Margulis, 1993). Women disclose more than men (Dindia & Allen, 1992), and self-disclosure seems to be a key variable in the process of relationship development and maintenance (Dindia, 2002). It could be that women rather discuss the issue with their partner than trying to cope for themselves as men do.

There are a few limitations to be discussed. All of our data are self-reports from questionnaires, indicating that they share a common bias and they entail the risk of social desirability. Therefore, it would be of high interest to include observer reports of couples' interactions. In our analysis, commitment was the outcome variable, and intradyadic chronic stress the predictor. As the research of Burke and Segrin (2014) shows, there was an indirect effect of people's commitment on their stress through increased loneliness. This suggests a reciprocal influence with the possible explanation that couples with higher commitment probably do not interpret conflicts as that detrimental because they know how to escape with humor or coping. The generalizability of the current results are limited since the participants of this study were mostly well educated, and quite committed couples (only 15 couples out of the originally 368 separated between wave 1 to 2) with little intradyadic stress, so it would be interesting to have this results tested with conflicted couples or maybe even couples seeking therapy.

Our results emphasize the importance of individual coping for men and dyadic coping for both partners to strengthen their commitment. A possibility to manage the reactivity to stress of couples is with prevention programs, for example the Couples Coping Enhancement

Training (CCET; Bodenmann, 2000; Bodenmann et al., 2002). In addition to traditional communication skills and problem solving, couples learn how to deal with stress effectively and how to cope together and to provide emotional and problem-focused support for each other. Promising evidence already exists that the CCET has long term benefits regarding couples' relationship satisfaction (e.g., Bodenmann et al., 2002). Individual and dyadic coping, which are enhanced in this prevention program seem to buffer the effects of stressors on mental health, but there are still some inconsistencies. According to Bolger, Zuckerman, and Kessler (2000), the awareness of receiving support is like an emotional cost, and therefore the most effective support is the invisible support, not noticed by the recipient.

To move on from negative emotional events and to create a stronger relationship, Gottman (2011) encourages couples to cultivate attunement through awareness, tolerance, understanding, non-defensive listening, and empathy. He argues that these qualities motivate confidence in partners and that, even with the unavoidable conflicts, the relationship is lasting and resilient. Our results are in line with the general tendency among men to prefer interpersonal distance during conflicts and periods of stress, while women engage in interpersonal and emotion-focused coping (Coyne & Smith, 1991; Gottlieb & Wagner, 1991).

PRACTICAL CONTRIBUTIONS

7. Magazine review: Prevention programs for couples - Methods and efficacy⁸

Übersicht

Die Prävention von Partnerschaftsstörungen gewinnt vor dem Hintergrund hoher Scheidungsraten in westlichen Gesellschaften und einer insgesamt relativ hohen Beziehungsunzufriedenheit mit zunehmender Partnerschaftsdauer eine wichtige Rolle. Basierend auf internationaler Grundlagenforschung zu Beziehungsstörungen und deren Determinanten, wurden in den letzten Jahren in den USA, Australien und dem deutschen Sprachraum (Deutschland, Schweiz) evidenzbasierte Präventionsprogramme für Paare entwickelt, welche vor allem darauf abzielen, Kompetenzen zu fördern (Probleme zu lösen, eine angemessene Kommunikation zu entwickeln, Stresssituationen zu bewältigen). Im deutschen Sprachraum sind vor allem *Ein Partnerschaftliches Lernprogramm* (EPL) und *paarlife* verbreitet. Beide Programme haben in mehreren Studien ihre Wirksamkeit unter Beweis gestellt.

Schlüsselwörter: Prävention bei Paaren, Partnerschaftstraining, Kompetenzen, Wirksamkeit

⁸ Bodenmann, G., & Kessler, M. (2011). Präventionsprogramme für Paare - Methoden und Wirksamkeit [Prevention programs for couples - Methods and efficacy]. *Familiendynamik*, 36(4), 346–355.

8. Book chapter: Communication training for couples and families⁹

Kommunikationstraining für Paare und Familien

Die dyadische Kommunikation zu verbessern war seit jeher das Ziel verhaltenstherapeutischer Interventionen bei Paaren (Bodenmann, 2012). Als therapeutische Intervention unterstützt ein Kommunikationstraining in einer intimen Beziehung die Sozialpartner, offen, konstruktiv und kongruent zu ihren Gefühlen und dem nonverbalen Verhalten miteinander zu sprechen (Hahlweg & Schröder, 2008). Kommunikationstrainings sind integraler Bestandteil von Paartherapien, Präventionsprogrammen und Programmen für Kinder, Jugendliche und Familien.

⁹ Kessler, M., & Bodenmann, G. (2014). Kommunikationstraining für Paare und Familien [Communication training for couples and families]. In M. Blanz, A. Florack, & U. Piontkowski (Eds.), *Kommunikation: eine interdisziplinäre Einführung* (pp. 227–236). Stuttgart: Kohlhammer.

GENERAL DISCUSSION

9. Summary of findings

The goal of the two studies was to evaluate how dyadic coping and commitment are linked. In Study I, we found significant effects of commitment and dyadic coping on relationship satisfaction. In addition, there was a significant interaction effect of commitment and dyadic coping. When participants scored low in common dyadic coping, commitment was linked more strongly to relationship satisfaction than in the condition of high common dyadic coping. However, this was different for young and middle-aged women, where commitment seemed to be less important for their relationship satisfaction when dyadic coping was high. For those women, behavior in an intimate relationship (i.e., dyadic coping) might have a greater impact on their relationship satisfaction than attitude (i.e., their commitment). As noted earlier, some prior research has suggested that relationship satisfaction influences commitment (Rusbult, 1980, 1983; Rusbult, Martz, & Agnew, 1998; Rusbult & Buunk, 1993; Van Lange et al., 1997), and other work has supported the theory that the influence is reciprocal (Fincham, Harold, & Gano-Phillips, 2000). Bandura's (1986) model of reciprocal causation states that behavior, cognition and other personal factors, and environmental influences all operate as interacting determinants that influence each other bidirectionally. According to Frank and Brandstätter (2002), *approach commitment* is a behavior directed at approaching positive incentives, such as striving for the positive incentives associated with continuing the relationship. Approach commitment predicts relationship quality, such as satisfaction and emotions. In contrast, *avoidance commitment* is a behavior directed at negative incentives, such as trying to avoid the negative incentives associated with breaking up the relationship. Avoidance commitment predicts relationship quality negatively. Additionally, the authors emphasized the bidirectional impact of approach commitment on the

other partner's relationship satisfaction. This reinforcement could result "in a kind of mutual escalation of satisfaction and approach commitment" (p. 218). It is thus conceivable that a circular mechanism leads to a reciprocally higher commitment and dyadic coping for couples who are satisfied in their relationship. Hence, rather than attempting to use unidirectional models to explain the relations among these variables, we refer to the model of mutual cyclical growth (Wieselquist et al., 1999). Dependence promotes commitment, which promotes pro-relationship acts, which are perceived by the partner and thus increase his or her trust, and this, ultimately, enhances willingness to become dependent on the relationship. In addition to this trust-based pathway, there could also be a gratitude-based pathway. This implies that thinking about the investment they have put into the relationship increases the awareness of the partner's value and this, as a consequence, makes people feel more grateful to have their partner, which finally results in higher commitment (Joel et al., 2013). This is consistent with Bem's (1972) self-perception theory: a change in attitude can result in a change in behavior, and a change in behavior can result in a change in attitude. These pathways have to be tested in follow-up longitudinal research. In summary, our results highlight the importance of commitment and dyadic coping and their joint influence on relationship satisfaction, an issue that has not been researched sufficiently in intimate relationships so far.

In Study II, we examined the impact of intradyadic stress on couples' commitment and whether coping could buffer this impact. We analyzed three different models: (1) individual coping as moderator, (2) dyadic coping as moderator, and (3) both individual and dyadic coping as moderators. The results showed that dyadic coping is important for both partners commitment. There was a significant effect of individual coping on commitment in men, and a significant interaction effect of intradyadic stress in combination with individual coping on participants' own commitment. This effect was even significant in the last model, in which both forms of coping were entered into the analyses. For women, there was no effect of

individual coping on commitment. It seems that women rather want to solve problems with their partners to strengthen their commitment, whereas men prefer to negotiate problems on their own. A possible explanation could be that women and men differ in their stress responses. According to Gottman (1994), men are often physiologically flooded and thus tend to withdraw from the conflict, while women try to discuss issues. The present results indicate that individual coping skills may prevent men from decreasing commitment, while for women dyadic coping seems to be especially important for their commitment.

This is in line with Brickman (1987), who says commitment is a dynamic phenomenon which grows stronger with challenge and stress. Gottman and Krokoff (1989) emphasize the paradoxical impact of negative interaction on relationship quality. Li and Fung (2013) found that committed partners are more vulnerable to the impacts of negative interactions in the short term, because commitment intensifies the short-term detrimental effect. Committed couples may be hurt more deeply and suffer more distress after dissolution (Frazier & Cook, 1993; Sprecher, Felmlee, Metts, Fehr, & Vanni, 1998), because they often include their partner more in their self-concept (Boelen & van den Hout, 2010), and they are more sensitive about the relationship. As a result, if relationships do not endure detrimental effects, and the partners separate, the more committed individuals suffer more. Then again, in the long run commitment intensifies the beneficial effect of negative interactions on relationship satisfaction (Li & Fung, 2013). This is in line with other studies, which have found that more negative exchanges can be beneficial to intimate or close relationships (Cohan & Bradbury, 1997; Fung, Yeung, Li, & Lang, 2009). The strengthening effects require time and effort and may only be observed in the long run and only in relationships which are able to survive the immediate detrimental effect of negative interactions, and this ultimately depends on the commitment to the relationship (Li & Fung, 2013). If individuals are more committed, they are more resilient to external stressors and show fewer fluctuations in relationship satisfaction (Arriaga, 2001; Carrere, Buehlman, Gottman, Coan, & Ruckstuhl, 2000; Wieselquist et al.,

1999). Negative aspects may even be evaluated as less central for their general evaluation of their relationship satisfaction compared to positive perceptions in the long run (Neff & Karney, 2003). In summary, if individuals are sufficiently committed and willing to learn from negative interactions, this may even be beneficial to their relationship satisfaction (Li & Fung, 2013). This interpretation is tentative but agrees with Schoebi et al.'s "no pain, no gain" results (2012, p. 740). Even negative problem-solving behavior, although at first associated with lower relationship satisfaction in the short-term, can be associated with higher relationship satisfaction longitudinally (Overall, Fletcher, Simpson, & Sibley, 2009). Commitment might motivate relationship maintenance behavior, such as forgiveness (Finkel et al., 2002), independently of relationship satisfaction (Schoebi et al., 2012).

*Now I would do most anything
To get you back by my side
But I just keep on laughing
Hiding the tears in my eyes
Because boys don't cry
Boys don't cry
Boys don't cry.*

The Cure (1979) - Boys don't cry

As coping was an important predictor of relationship satisfaction and commitment in both studies, an overview of prevention programs for couples, especially the Couples Coping Enhancement Training (CCET; Bodenmann & Shantinath, 2004), which strengthens dyadic coping, was included in this thesis (see Chapter 7). The methods and efficacy of different evidence-based prevention programs were presented. They are designed to promote relevant skills to couples, such as problem-solving, appropriate communication strategies, coping with stress, and have been developed in the United States, Australia, Germany, and Switzerland.

Improving and maintaining communication skills is a central component in these programs and in couple therapy. Therefore, a book chapter (see Chapter 8) about communication training for couples and families was included in this thesis to extend understanding of how communication in prevention programs work for couples and families.

10. Limitations

*We fear the things
We do not understand*

....

*For love
The only thing
That makes us human*

Ulver (2007) - All the love

Several limitations should be considered when interpreting the findings of our empirical and practical contributions. First, our model in Study I implies a certain direction of effects: namely, that dyadic coping moderates the influences of commitment on relationship satisfaction. It is likely that links among the three constructs are more complex, and it may also be possible that commitment serves as moderator, in the sense that dyadic coping only works for people who are highly committed in the first place. Future research is needed to prove the viability of the hypothesized direction of effects. Second, the cross-sectional nature of Study I restricts any causal interpretation of the findings. Only longitudinal research would provide more information about causality, and diary studies are needed to enhance our knowledge about fluctuations. Third, our participants reported high commitment and relationship satisfaction, and due to this ceiling effect, we have only little variance. The associations were therefore small to medium in terms of their effect size (Cohen, 1988) with a large amount of unexplained variability. Fourth, our study was limited to heterosexual German-speaking couples, so we cannot generalize the findings to couples with differing backgrounds. In addition, the study participants were rather well-educated middle class couples. In a future study, it would be interesting to include couples with lower socioeconomic status and also high-distressed or clinical samples. Fifth, we exclusively used self-report measures in Studies I and II, which entails the risk that effects are inflated because of shared method variance. It would be useful to include behavioral data in future research.

Sixth, we presented the "fight or flight" (Cannon, 1932) reaction of men as possible explanation for the different picture of men and women in Study II. We postulated that that men are flooded, leading to withdrawals (Gottman, 1994), as opposed to the "tend and befriend" behavior of women (Taylor et al., 2000). In order to test this assumption, we not only need behavioral data, but also physiological data such as heart rate, cortisol levels, and electro dermal response.

The discussion and critique of prevention programs, the implications and what could be improved about such programs will be discussed in Chapter 11.

Future research: Commitment

For the two studies a new multidimensional, economic concept of commitment was developed, although there are already different conceptualizations of commitment (see Chapter 2). One merits further empirical investigation as it would be interesting to combine it with this new concept of the COM SEC. The multidimensional "approach versus avoidance" theory with motivational and behavioral criteria by Frank and Brandstätter (2002) analyzes commitment in terms of its incentives and motivation, which permits a deeper understanding of underlying affective processes. Their concept is in line with M. P. Johnson's (1991) tripartite model in the relationship domain, and Meyer and Allen's (1991) commitment concept in the organizational domain. Frank and Brandstätter (2002) see personal and affective commitment as an approach orientation (i.e., "want to") by referring to positive incentives. Avoidance orientation involves more the negative incentives and is therefore comparable with the moral and normative commitment (i.e., "ought to") and structural and continuance commitment (i.e., "have to"). Their longitudinal analysis revealed that *approach commitment* (attachment, identification with partner) predicted relationship quality parameters positively and was associated with promotion focus (universalism, humanism) and positive time spent with the partner. Promotion focus regulates the presence and absence of positive outcomes and is concerned with accomplishments, hopes, and aspirations (Higgins, 1998).

Frank and Brandstätter (2002) describe approach commitment as a motivational concept, an intention to continue one's intimate relationship, which is therefore distinct from relationship satisfaction, which represents affective judgments of the relationship. This leads to the result that only approach commitment emerged as a significant predictor for motivational related measures and not satisfaction. *Avoidance commitment* predicted the relationship quality parameter negatively and was associated with prevention focus (i.e., security, conformity, and tradition) and less frequent positive affect. Prevention focus regulates the absence and presence of negative outcomes and is concerned with safety, responsibilities, and obligations (Higgins, 1998). To examine interdependence, Frank and Brandstätter (2002) adopted the mutual cyclical growth model (Wieselquist et al., 1999) and found that a partner's approach commitment was significantly linked with an individual's satisfaction and vice versa, indicating a positive bidirectionality (Rusbult & Buunk, 1993).

Approach relationship goals may also buffer against declines in sexual desire over time. Impett, Strachman, Finkel, & Gable (2008) found that they were significant predictors of increased sexual desire during daily sexual interactions. The link between approach relationship goals and daily sexual desire was mediated by approach sexual goals. The desire on days with positive relationship events was even stronger for individuals with more approach goals. On days with negative relationships events, these individuals even experienced less decrease in desire than those who were low in approach goals.

The approach research yields interesting insights on how to strengthen relationships by psycho-education and how to set approach goals and focus on the positive aspects in a relationship. Further research should focus on approach and avoidance commitment, and also on the interaction of coping and commitment. For example, how can commitment be strengthened and maintained; which couples profit from dyadic coping and which from individual coping; what impact does attachment style and neuroticism have on dyadic coping and commitment; how do commitment and coping change over the course of a relationship,

and which factors work as mediators or moderators? More controlled randomized studies longitudinal studies are needed to address these questions.

11. Implications

Despite these limitations, the results of Studies I and II are still relevant for clinical practice. In prevention programs or therapy intervention, practitioners need to assist couples in building mutual trust, closeness, and intimacy in their relationships and to teach them adequate support provision (Bodenmann, 2010). However, it is not only dyadic coping that plays an increasingly important role in our stressful time, but also the focus on building and maintaining commitment in the relationship. Commitment merits further attention in our fast-paced society, where we have ever fewer barriers to ending even satisfactory relationships. Hence, because western culture has become more individualistic since the 1960s, while for example the eastern culture is still more collectivistic, marriage is seen as a vehicle for personal growth, self-actualization, personal choice, and self-development (Cherlin, 2004). This has an impact on our general level of commitment and on our goal setting, for instance, whether we prioritize communal goals (communal attitudes are more likely to have more emphasis on marriage than on personal aspirations) over individual goals. Communal marital values, for example, are correlated with commitment, marital satisfaction, and partner trust but are negatively correlated with feelings of entrapment (Ripley, Worthington, Bromley, & Kemper, 2005).

Markman and Rhoades (2012) further suggest that relationship commitment could be an important variable moderating prevention or therapy effects. Without a minimum level of commitment, many couples are not willing to participate in relationship programs. When partners are not committed, the prognosis for improving or even saving the relationship is relatively poor (Birchler, Doumas, & Fals-Stewart, 1999). These authors claim that both partners have to be committed to stability as a long-term perspective, quality in terms of devoting time and energy to monitoring and improving the relationship, and intervention in adapting to and accepting what is unlikely to change. Future prevention programs should not only focus on communication skills but also on helping couples to consider and discuss their

expectations, and on specific psycho-educational material on commitment. They suggest a focus on a specific "do your part" element, meaning that each partner has to work on him- or herself. Self-improvement increases the chance of having a healthy and happy relationship by enhancing the management of negative effects, increasing positive connections, and fostering the understanding of commitment, sacrifice, and forgiveness in intimate relationships (Fincham, Stanley, & Beach, 2007).

Strengthening commitment

Sternberg (1986) claims in his theory of love that the worst enemy of intimacy in intimate relationships is stagnation, as too much predictability can undermine the amount of intimacy experienced. Hence, it is necessary to keep the relationship growing by introducing some elements of change and variation, such as vacations, developing new mutual interests, or experimenting with new behavioral patterns in the relationship. Further, a couple should steadily analyze the needs the relationship is fulfilling, which needs are not fulfilled, and how they could try to develop the relationship in such a way that those needs are also met. For Sternberg, the decision / commitment component is the easiest to alter as it is consciously controllable. To maintain commitment, it is best to by sustain the importance of the relationship in the couple's lives and at the same time to maximize the happiness one achieves through the relationship. "Doing these things entails working on the intimacy and passion components of love, and especially expressing these components as well as one's commitment to the relationship through action" (Sternberg, 1986, p. 134). This is in line with Bem's (1972) self-perception theory: the way people act (behavior) shapes the way they feel (emotion) and think (cognition), and the way people feel and think shapes the way they act, respectively.

If we consider the Rusbult's (1980, 1983) investment model, commitment could be enhanced through (a) satisfaction, (b) alternatives, or (c) investment. According the social exchange theory (Kelley & Thibaut, 1978; Thibaut & Kelley, 1959), (a) satisfaction could be increased by reducing the costs and enhancing the rewards, which makes the relationship

more attractive and leads to more commitment. This can potentially be achieved by means of reciprocity training (Bodenmann, 2012). Couples experience the relationship as more rewarding when they enhance positivity through common activity, listen to each other, ask how the partner feels, give presents they know the partner likes, and show that the partners care for each other's interests and well-being. Completion of reciprocity training may help to enhance the commitment to each other and the relationship in the long-term. An analysis of survey data collected over eight years from a national sample of more than 1000 individuals revealed that declining levels of positivity are observed at all stages of the life course, although more pronounced in the early years of marriage (Umberson, Williams, Powers, Chen, & Campbell, 2005).

However, it is rather problematic to change the (b) alternatives, as they are outside the couple's area of influence. The perceptions of these alternatives are a very interesting field of research for clinicians in order to examine the reasons of why these alternatives are more attractive than the current relationship; to what is missing, and how the current relationship quality could be enhanced (for example with reciprocity training and hedonistic activities).

Commitment can also be strengthened through (c) investment. Participants who rated that their partners invested more over a 2-week period reported increased commitment to their relationship three months later, and this was mediated through increased feelings of gratitude for the partner (Joel et al., 2013). Individuals are motivated to stay in a relationship, when they perceive that their partner has invested a lot, even though they experience difficulties in their relationship. Partners should try to verbally express their commitment to each other. Such statements give the partners the feeling of more security to commit to the relationship in a mutual way (Joel et al., 2013). What is especially important is intangible investment, such as emotional involvement, as this was shown to be a particularly robust predictor for relationship stability and commitment, much more than material investment, such as financial investment (Goodfriend & Agnew, 2008).

Commitment and *cognitive interdependence* (a mental state characterized by a pluralistic, collective representation of the self-in-relationship) operate in a cycle of mutual influence (Agnew et al., 1998). This knowledge could be used as a practical implication to involve the development of cognitive interdependence enhancement techniques in the form of psycho-education and homework. Partners could actively try to see their relationship as a central part of the lives they plan together rather than by themselves. They could try to enhance the use of *we* in everyday conversations rather than *I*.

Expectations

A common problem that many couples are confronted with is that they do not share expectations in the relationship, which influences their commitment to the relationship. For example, about one third of couples disagree about who should be responsible for which aspect of family labor (Hiller & Philliber, 1986). Moreover, women have a stronger belief in sharing housework than men (Hohmann-Marriott, 2006). Whereas sharing expectations leads to more stable relationships and enhances relationship quality (Kenny & Acitelli, 2001), divergent beliefs and expectations will lead to a potentially unstable relationship. This because they lack a common basis for understanding one another (Kurdek, 1993), and are even more likely to end their relationships (Glenn, 1998; Hohmann-Marriott, 2006). Glenn (1998) further claimed that spouses have to be diligent in maintaining their relationships by making special efforts to improvements. Researchers agree that partners need problem-solving and communication skills to resolve difficulties that inevitably arise when they do not share beliefs (Cohan & Bradbury, 1997; Gottman, 1993, 1994; Gottman, Coan, Carrere, & Swanson, 1998).

Attributions

However, not only are the expectations are important; the attributions which are made concerning the partner's behavior also affect commitment. Waldinger and Schulz (2006) found in their study, in which couples had to rate their own videotaped interactions on video

recalls, that attributions about one partner's intentions were only weakly to moderately linked with the other partner's actual self-reported intentions. In the midst of heated discussions about particular events, spouses may often make important judgments about their partner's intentions. Negative attributions decline relationship satisfaction (Bradbury & Fincham, 1992), so changing attributions might enhance relationship commitment and satisfaction. Waldinger and Schulz (2006) suggest that clinicians working with distressed couples should pay more attention to the emotional climate in which attributions are made, as emotions mediate the link between attributions and relationship satisfaction. Clinicians could do this by focusing on actual interaction (either in the therapy setting or videotaped) rather than on reports of stable attribution patterns or styles so as to look at emotions which can influence the processes and by which attributions are shaped. It might be possible to enhance commitment through the influence of spouses' attributions to the partners' behavior in a way that is favorable for the relationship. For example if the partners comes home completely stressed from work and is irritable, the attribution of the spouse could be external rather than internal (Halford & Bodenmann, 2013).

Self-disclosure

Telling another about one's intimate feelings, attitudes, and expectations is defined as self-disclosure, which is another important approach to enhancing commitment. It is positively associated with relationship quality, as are satisfaction, love, and commitment and likely to be enhanced if the partners disclose reciprocally (Sprecher & Hendrick, 2004). Women in couples who broke up perceived their partner's self-disclosure as significantly lower when they were still together than women in a maintaining relationship.

Efficient and less efficient prevention programs

The Building Strong Families (BSF) project, a program offering group sessions for over 5,000 couples (cost \$11,000 per couple) on relationship skills education to low-income, unmarried parents who were expecting or had recently had a baby, did not succeed in its

central objectives, which were improving the couple relationship, increasing co-parenting, and enhancing father involvement (Wood, Moore, Clarkwest, & Killewald, 2014). On the contrary, modest negative effects occurred; BSF fathers would be somewhat less likely to spend time with their children and to provide financial support for them than control group fathers. BSF also had little impact on child well-being, with no effect on the children's family stability or economic well-being, and only a modestly positive effect on children's socio-emotional development. Impacts varied across the eight study sites. Although attendance at group sessions was relatively low, there was little evidence of program effects even among couples who attended sessions regularly.

Supporting Healthy Marriage (SHM) is another prevention program for low-income, expectant parents or parents of a child under age 18 who lived in their home (Hsueh & Knox, 2014). A total of 6,298 couples participated in the program from February 2007 to December 2009. In the 12-month report, the program showed positive effects on the quality of couples' relationships, slightly lower levels of individual psychological distress with less psychological and physical abuse compared with the control groups. However, the costs were extremely high, with an average cost of \$9,100 per couple, and estimated impacts were smaller than in earlier studies in this area (Blanchard, Hawkins, Baldwin, & Fawcett, 2009; Hawkins et al., 2008). The final report at 30 months showed that the SHM couples did not separate less often and SHM had little effect on indicators of coparenting, parenting, or child well-being. For women, but not for men, levels of sadness and anxiety were reduced after the completion of SHM.

The Community Healthy Marriage Initiatives (CHMI) evaluated family strengthening and an implementation and impact evaluation of multi-component healthy marriage and relationship education (Lerman & Bir, 2014). Approximately 77,000 people participated in classes which were generally eight hours long. The funding per participant was about

\$227 - 439. There were no significant gains on outcomes detected between the communities with the prevention program and control communities.

Those three Healthy Marriage Initiatives had three major problems, according to M. D. Johnson (2012). First, few interventions used in the programs were empirically supported, so neither were they built on solid science, nor did anyone quantitatively track their success. Second, couples who had the most problems were the least likely to take advantage of couple intervention. Third, the evidence-based programs worked with middle class, white, college-educated and married couples, the segment of the population at lowest risk (Karney & Bradbury, 2005), so it is unclear whether the same programs would work for couples who are at higher risk of relationship discord and dissolution; little is known about the longitudinal predictors for such couples (Blanchard et al., 2009; Hawkins et al., 2008). The fact that the chance that black women's first marriages end was estimated at 70%, compared to just 47% for white women, emphasizes the relevance of this issue (Raley & Bumpass, 2003).

Halford and Bodenmann (2013) reported some more caveats concerning these programs. For instance, the key outcome of relationship satisfaction was assessed with a single item after the training and not before, so a baseline for relationship satisfaction was lacking. In the BSF and SHM Studies, couples received 24 to 42 hours of group relationship education, but Hawkins, Blanchard, Baldwin and Fawcett (2008) showed in their meta-analysis that programs of moderate dosage (9 - 20 hours) had substantially larger effect sizes on relationship quality and communication skills than low-dosage (1 - 8 hours) programs. The quality and integrity of delivery is another important prerequisite for the impact of prevention programs, because the more broadly they are disseminated, the harder it is to control them.

Whilst these findings raise some doubts about the efficacy of prevention programs, others clearly stress the benefits they may have in terms of relationship quality and satisfaction (see Chapter 7). Halford and Bodenmann (2013) evaluated 17 published

randomized controlled studies of couple relationship education prevention programs with follow-up assessments at least one year after the training. In summary, 14 of the 17 trials helped couples to maintain high relationship satisfaction. In a meta-analysis, Blanchard, Hawkins, Baldwin, and Fawcett (2009) also found that marriage and relationship education (MRE) showed modest evidence of positive effects on couples' communication skills. Well-functioning couples showed long-term effects in improving and maintaining communications skills, while distressed couples only benefited in the short term. They might benefit from a booster sessions to maintain the effects of such programs (Braukhaus, Hahlweg, Kroeger, Groth, & Fehm-Wolfsdorf, 2003; Schär & Bodenmann, 2007). Halford and Bodenmann (2013) conclude that almost all couples could profit from a prevention program. Those who are very satisfied the first few years could be buffered from erosion (Lavner & Bradbury, 2012), and more distressed couples could profit by enhancing skills, especially those which are modifiable, such as communication, problem-solving, self-regulation, and dyadic coping. One of those prevention programs which is empirically evaluated is the Couples Coping Enhancement Training (CCET; Bodenmann, 1997, 2000a).

CCET

The CCET is an evidence-based relationship distress prevention program which is based on stress and coping research and social learning theories and is designed to improve relationship competencies, in particular communication, problem-solving skills, and dyadic coping (Bodenmann, 1997, 2008; Bodenmann & Shantinath, 2004). Different studies have yielded empirical evidence of effectiveness and efficacy (Landis, Peter-Wight, Martin, & Bodenmann, 2013; Ledermann, Bodenmann, & Cina, 2007; Pihet et al., 2007; Schär, Bodenmann, & Klink, 2008; Widmer, Cina, Charvoz, Shantinath, & Bodenman, 2005). Longitudinal studies have shown that couples who attended the CCET showed enhanced dyadic coping afterwards and as a consequence experienced reduced distress and increased satisfaction in their relationship (Bodenmann, Bradbury, & Pihet, 2009; Bodenmann et al.,

2002; Bodenmann, Pihet, et al., 2006; Widmer & Bodenmann, 2009). More positive outcomes were shown in several randomized controlled trials, such as more intimacy and more positive communication (Bodenmann et al., 2006; Randall et al., 2010), increased positive or decreased negative problem-solving behavior (Bodenmann, Bradbury, & Pihet, 2009), enhanced well-being (Pihet et al., 2007), and reduced depressive symptoms (Bodenmann et al., 2008).

COCT

The Coping-Oriented Couples Therapy (COCT; Bodenmann, 2010; Bodenmann et al., 2008) uses classical elements of cognitive behavioral couple therapy (Bodenmann & Randall, 2012) alike the CCET (Bodenmann & Shantinath, 2004; Bodenmann, 1997). These are the techniques shown to predict a positive course of the relationship: communication skills, dyadic coping, and problem-solving (Bodenmann, 2005). Two therapeutic elements have been proposed in coping-oriented couple interventions based on dyadic coping research: (1) psycho-education about the negative impact of stress on the relationship, and (2) training how to cope by means of the 3-phase method (see Chapter 8), designed to enhance dyadic coping (Bodenmann, 2007, 2010).

The effectiveness of COCT has been compared to cognitive behavioral therapy (CBT; Beck, Ward, Mendelson, Mock, & Erbaugh, 1961) and interpersonal therapy (IPT; Weissman, Markowitz, & Klerman, 2000), two well established evidenced-based treatment approaches. The COCT was as effective as the CBT and the IPT in improving depressive symptomatology in couples. Strikingly, the relapse rate over a 1.5-year follow-up was much lower among recovered patients for the COCT (28.6%) than it was for CBT (42.9%) or the IPT conditions (62.5%) (Bodenmann et al., 2008).

New approaches

New approaches to disseminating prevention, such as the instructional DVD-based program, the Couple Coping Enhancement Training DVD (CCET-DVD), are promising

(Bodenmann, Schär, & Gmelch, 2008b). The interactive CCET-DVD has a conceptual foundation in cognitive-behavioral principles of change in couple relationships and in how dyads manage stress. It allows couples to work on their relationship in a fully self-directed manner for a total of five hours. A study showed that couples could profit even from such a low-threshold intervention, which allows couples to work on their relationship even when they face many barriers, such as long journeys, insufficient time, or embarrassment at visiting a group program. Participants reported increased personal happiness, which was predicted by an increase in skills and relationship satisfaction. Women reported additionally increased dyadic coping and reduced conflict behavior and were more satisfied six months after the intervention (Bodenmann, Hilpert, Nussbeck, & Bradbury, 2014).

Another new preventive approach is the commitment evening course developed by Bodenmann, which focuses on intimacy, commitment, and passion (Bodenmann & Fux Brändli, 2011). On three evenings, recent findings in couple research and the impact of on intimacy, commitment, and passion on relationships are presented to and discussed with the couples. Considering the low- and high-distress couples distinguished by Amato and Hohmann-Marriott (2007), it is possible that high-distress couples could benefit more from the classic CCET, with its emphasis on conflict resolution skills and reinforcing positive interpersonal behavior (Randall et al., 2010). The low-distress couples may more likely benefit from the commitment evening course with the goal of building and maintaining commitment, as they probably lack commitment and realistic expectations rather than skills. This concern should be addressed in further research, because it is important to understand why low-distress couples divorce, as remarked by Lavner and Bradbury (2012), and how these divorces could be prevented.

12. Conclusion

*The power of love, a force from above, cleaning my soul
The power of love, a force from above, a sky-scraping dove
Flame on burn desire, love with tongues of fire, purge the soul
Make love your goal
I'll protect you from the hooded claw, keep the vampires from your door.*
Frankie Goes to Hollywood (1984) - The Power Of Love

The saying that “the grass isn't always greener on the other side of the fence” indicates for me a pivotal problem of today's intimate relationships. As we have so many opportunities, particularly through the Internet, but also in real life, to meet attractive potential partners, and these are usually much more exciting in the beginning than in a long-term relationship, people nowadays do not want to choose and to commit to a single person. However, the impacts of relationship separations are far-reaching, leading to reduced health in partners, extensive economic costs, and maladjustment in children and even in grandchildren.

The hope that the relationship will be better with a new partner often wanes after some time. Although one might expect that partners have learned something from an earlier marriage, the divorce rate is not lower for second marriages. Therefore, couples should invest in the same relationship, for example by visiting a prevention program together, ideally when the couple is still happy, or at least looking for couple therapy before negativity is much stronger than positivity.

I'd like to finish this thesis with the words of John Lydon (1996, p. 211):

"It is not in isolation but in our connectedness (to people, ideas, or goals) that we may realize and become our true selves."

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